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[Check applicable boxes, complete applicable blanks, strike inapplicable language, and attach supporting documentation.]

The applicant states that: _____, is an adult ward residing at _____ in this county who on or about _____, suffered personal injury and/or damage to property by wrongful act, neglect, or default that entitles this person to maintain an action to recover damages.

Attached is a narrative statement in support of the proffered settlement setting forth a description of the occurrence, the injury or damage, the treatment progress and current prognosis by the treating physicians, and other proposed or actual settlements resulting from the same occurrence being paid to the persons other than this ward. Counsel will advise at the hearing as to liability and collectability.

- There is a (full) (partial) settlement offer of \$ _____ without suit being filed.
- There is a (full) (partial) settlement offer of \$ _____ after suit was filed; the style of the case, court, and case number being _____.
- The proffered settlement should be approved.
- Unreimbursed medical and other expenses of \$ _____ have been incurred. Attached is a list of such expenses and proposed payees.
- A reasonable attorney fee for the attorney's services is \$ _____ and reimbursement to the attorney for suit expenses is \$ _____. A copy of the attorney's fee contract that has (has not) received prior approval of this Court, subject to modification, and an itemization of suit expenses are attached.
- This is a structured settlement. All necessary documents, including a statement of the present value of the settlement, are filed herewith.

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Applicant requests that:

- The Court authorize the applicant to execute a release which shall be effective upon payment of the settlement.
- The Court order payment of the above expenses and order that the net amount of \$_____ for the benefit of the ward be:
 - Deposited in the name of the ward with _____, a financial institution, in a restricted account and not be released without written order of this Court.
 - Delivered to guardian of the estate.
 - Structured as set forth in the attached documents.
 - Other: _____.
- Supplemental forms required by local rule of Court are attached.

Attorney for Applicant

Applicant

Typed or Printed Name

Typed or Printed Name

Address

Address

Phone Number (include area code)

Phone Number (include area code)

Attorney Registration No. _____

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The Court sets _____, at _____ o'clock __.m. as the date and time for hearing the above application and orders notice to be given by the applicant, as provided in the Rules of Civil Procedure, to all interested parties.

_____, **DFC65H9>I 8; 9**