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5 **IN THE SUPERIOR COURT OF WASHINGTON**
FOR THE COUNTY OF KING

6 Regarding the Settlement of:

Case No.:

7 _____
8 _____

SETTLEMENT GUARDIAN AD LITEM REPORT
SUMMARY

9
10 **I. SUMMARY OF RECOMMENDATIONS:**

11 Minor Name: _____ Amount of Gross Settlement: _____

12 Attorney Fees/Costs: _____ SGAL Fees: _____ Medical Costs: _____ Other: _____

13 Proposed Net to Minor: _____

14 Special Issues (if any): _____

15 _____
16
17 Recommendation: _____

18 _____
19
20 Plaintiff's Attorney (Name/Address,/Phone): _____

21 Defendant's Attorney (Name Address, Phone): _____

22 Mediator (if any): _____

23 Minor Person #1: (Name) _____ Date of Birth: _____

24 Parent/Guardian(s) of Minor (Name/Address/Phone): _____

25 Proposed Disposition of Net Proceeds (check all applicable boxes):

- 26 Blocked Account Structured Settlement Trust Guardianship Other