

**OFFICE OF THE EXECUTIVE SECRETARY  
SETTLEMENT CONFERENCE REPORT FORM**

Settlement Judge:

Case Style:

Referring Court:

Date Case Filed:

Date Case Referred to Settlement Conference:

Date of Settlement Conference:

Location of Settlement Conference:

Length of Settlement Conference:                      Hours    Time Spent Preparing for Conference:                      Hours

Counsel Present?    Defendant      Yes      No              Plaintiff      Yes      No

Agreement Reached at Conference?      Yes      No      After Conference/Before Trial:      Yes      No

Exit Surveys Provided to Parties?      Yes      No

Case Type: (Please be as specific as possible. Only use Miscellaneous if no other category can apply)

**Tort/Personal Injury:**    Assault      Auto Accident      Fraud      Medical Malpractice

Product Liability      Slip Fall      Libel Defamation

Other PI (Type: \_\_\_\_\_ )

**Domestic Relations:**    Divorce      Probate      Adult Guardianship

Other Domestic (Type: \_\_\_\_\_ )

**Commercial:**    Debt      Construction      Contract      Landlord/Tenant      Condemnation

Real Estate      Other Commercial (Type: \_\_\_\_\_ )

**Miscellaneous:**    (Type: \_\_\_\_\_ )

Comments:

*Please return this form with your invoice for payment to:  
Dispute Resolution Services, 100 North 9<sup>th</sup> Street, Richmond, Virginia 23219*