

[Your Name/Law Firm Name]
[Address]
[City, State, Zip Code]
[Phone Number]
[Email Address]

[Date]

[Insurance Adjuster Name]
[Insurance Company Name]
[Address]
[City, State, Zip Code]

RE: Notice of Settlement / Minor's Compromise

Claimant: [Minor's Full Name]
Guardian: [Parent/Guardian Name]
Insured: [Property/Business Name]
Date of Loss: [Date of Incident]
Claim Number: [Claim Number]

Dear [Adjuster Name],

This letter serves to formally confirm the settlement agreement reached regarding the personal injury claim of the minor, [Minor's Name], arising from the slip and fall incident on [Date] at [Location].

The parties have agreed to a total settlement amount of \$[Total Dollar Amount] as full and final satisfaction of all claims. We understand that because the claimant is a minor, this settlement is contingent upon [Court Approval / Guardian Signature] according to local statutes.

The proposed distribution of the settlement funds is as follows:

- Gross Settlement: \$[Total Amount]
- Attorney Fees: \$[Amount]
- Medical Liens/Costs: \$[Amount]
- Net to Minor: \$[Amount]

The net proceeds for the minor will be placed into [a Court-Approved Blocked Account / an Annuity / a Uniform Transfers to Minors Act Account] and will remain held until the minor reaches the age of majority.

Please forward the necessary Release of All Claims documents for review. Upon approval by the court (if applicable), we will provide the signed order and instructions for the issuance of the settlement drafts.

Sincerely,

[Your Signature]

[Your Printed Name]