

COVER SHEET

**APPLICATION FOR COURT APPROVAL OF
TRANSFER OF STRUCTURED SETTLEMENT PROCEEDS**

Case Name: _____ C.A. No.: _____

Terms of Proposed Transfer: _____

Aggregate Amount of Purchased Payments: _____

Discounted Present Value of Aggregate Payments:

\$ _____ at _____ % interest

Gross Amount Payable to Seller: \$ _____

Itemization of Attorneys' Fees and Expenses to be Deducted from Purchase Price:

Item: _____ \$ _____

Item: _____ \$ _____

Item: _____ \$ _____

Item: _____ \$ _____

Item: _____ \$ _____

Total: \$ _____

Net Amount Payable to Seller: \$ _____

Effective Annual Discount Rate: _____ %

Net Amount = _____ % of Estimated Current Value of Payments

Effective Interest Rate to be Paid by Seller: _____ %

Original Personal Injury Case underlying Structured Settlement:

C.A. No.: _____

Nature of Injury: _____

Amount and Terms of Structured Settlement: _____

Purpose of Structured Settlement: _____

Summary of Prior Applications for Court Approval of Transfer of Structured Settlement Proceeds (in Rhode Island and any other jurisdictions) including case number, terms of proposed transfer (see page 1 of this Cover Sheet), disposition (granted or denied) and date of disposition
