

TRIAL SET MEMORANDUM / DIVISION CV-C

(**Complete** before presenting to the Court and provide addressed/stamped envelopes for pro se parties)

Today's Date: _____

Case No.: _____

Jury Trial _____ Non-Jury Trial _____

Estimated Time for Trial: _____ days/hours

I. Plaintiff(s) _____
Defendant(s) _____

II. Type of Case: () Personal Injury () Contract () Auto Negligence
 () Medical Malpractice () Condemnation () Other (specify)

III. Issue(s): _____

IV. Expert Witness Deadlines: P: 120 days D: 90 days _____ Other: _____

V. Attorney(s) for Plaintiff(s)

Attorney(s) for Defendant(s)

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Email Addresses (counsel/asst):

Email Addresses (counsel/asst):

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Email Addresses (counsel/asst):

Email Addresses (counsel/asst):

****TO BE COMPLETED BY COURT****

I. Trial Week: _____

PTC: _____

Date Certain: _____

PTC: _____

II. Mediator: _____

III. Comments: _____