

TRIAL SET MEMORANDUM / DIVISION CV-C

(Complete before presenting to the Court and provide an addressed/stamped envelope for pro se party)

Date: _____

Case No.: _____

Jury Trial _____ Non-Jury Trial _____

Amount of Time for Trial: _____ days/hours

Agreed Trial Week: _____ (request available trial weeks from Judicial Assistant)

Agreed Mediator: _____ (name)

_____ (e-filing address)

Expert Witness Disclosures: 150/120 _____ Other _____ (no less than 150/120)

Case Style: _____ Plaintiff(s)

_____ Defendant(s)

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

Issue(s): _____

Attorney(s) for Plaintiff(s)

Attorney(s) for Defendant(s)

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Email Addresses (service/counsel/asst):

Email Addresses (service/counsel/asst):

(which defendant if multiple) _____

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Email Addresses (service/counsel/asst):

Email Addresses (service/counsel/asst):

(which defendant if multiple) _____