

TRIAL SET MEMORANDUM / DIVISION CV-C

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

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: 150/120 _____ Other _____

V. 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):

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Email Addresses (service/counsel/asst):

Email Addresses (service/counsel/asst):

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

I. Trial Week: _____

PTC: _____

Date Certain: _____

PTC: _____

II. Mediator: _____

III. Comments: _____