**TRIAL SET MEMORANDUM FM-B**

**(PLEASE COMPLETE BEFORE PRESENTING TO COURT)**

1.TYPE OF CASE*:* □ ORIGINAL D.O.M. □ PETITION TO MODIFY

□ PATERNITY □ ADOPTION

□ OTHER (SPECIFY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Plaintiff Petitioner Husband (Circle one)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Defendant Respondent Wife (Circle one)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Case No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Issue(s), e.g*.*, Parental Responsibility, Child Support, etc.:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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4. Motion(s) and corresponding docket line number, e.g. “Motion for Supervised Visitation, #D100”

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5. Estimated Time for Hearing: Days: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hours: \_\_\_\_\_\_\_\_\_\_\_

6. Attorney(s) for Plaintiff/Petitioner/Husband:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attorney(s) for Defendant/Respondent/Wife:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. ATTENDED C.F.I.D. CLASS: Yes\_\_\_\_\_\_ No\_\_\_\_\_\_ Not Applicable \_\_\_\_\_

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TO BE COMPLETED BY COURT TODAY’S DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: WEEK OF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE CERTAIN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRETRIAL CONFERENCE: Yes\_\_\_\_\_ No \_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_ Time\_\_\_\_\_\_\_\_\_

1. Pretrial Order \_\_\_\_\_Yes \_\_\_\_\_No

2. Pretrial Stipulation \_\_\_\_\_Yes \_\_\_\_\_No

3. Mediation \_\_\_\_\_Yes \_\_\_\_\_No

NAME OF MEDIATOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_