**Trial Set Memorandum**

**DIVISION A – The Honorable Steven B. Whittington**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Today’s Date:  Jury Trial  Non-Jury Trial | | Estimated Time for Trial:  \_\_\_\_\_\_\_\_\_\_ days  \_\_\_\_\_\_\_\_\_\_ hours | | | |
|  | |  | | | |
| **CASE INFORMATION** | | | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  VS.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Case No.: | Division:  **A** |
| **TYPE OF CASE** | | | | | |
| Personal Injury Auto Negligence Contract Medical Malpractice Condemnation  Other (explain) | | | | | |
| **ISSUE(S)** | | | | | |
|  | | | | | |
| **EXPERT WITNESS DEADLINE: desired expired witness disclosure deadlines** | | | | | |
| 120 days/90 days  90 days/60 days  60 days/45 days Other: | | | | | |
| Requested Mediator / Email: | | | | | |
| **ATTORNEY(S) FOR PLAINTIFF(S)** | | **ATTORNEY(S) FOR DEFENDANT(S)** | | | |
| Name |  | Name |  | | |
| Address |  | Address |  | | |
|  |  | | |
| Phone |  | Phone |  | | |
| Email |  | Email |  | | |
| Atty for |  | Atty for |  | | |
|  |  |  |  | | |
| Name |  | Name |  | | |
| Address |  | Address |  | | |
|  |  | | |
| Phone |  | Phone |  | | |
| Email |  | Email |  | | |
| Atty for |  | Atty for |  | | |
| **INFORMATION BELOW TO BE COMPLETED BY COURT** | | | | | |
| Date Certain: |  | Trial Week of: | | | |
| PTC: Yes No | | PTC Date: PTC Time: | | | |
| Refer to Mediation: Yes No | | Name of Mediator: | | | |
| Comments: | | | | | |

**PLEASE DOCKET THIS COMPLETED FORM**