

CASE NO.: \_\_\_\_\_

\_\_\_\_\_ vs. \_\_\_\_\_

1. All parties joined (Yes or No)? \_\_\_\_\_ If NO, why not: \_\_\_\_\_

2. Nature of case: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Injuries or damages: \_\_\_\_\_  
\_\_\_\_\_

4. Special damages: \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
**TOTAL** \$ \_\_\_\_\_

5. Discovery status:	Completed:	Anticipated/pending & date to be completed:
A. Depositions	<input type="checkbox"/>	_____
B. Interrogatories	<input type="checkbox"/>	_____
C. Production of Documents/Things	<input type="checkbox"/>	_____
D. Requests for Admissions	<input type="checkbox"/>	_____
E. Rule 35 examinations	<input type="checkbox"/>	_____
F. Obtaining medical records	<input type="checkbox"/>	_____
G. Exchange medical records	<input type="checkbox"/>	_____
H. Exchange of expert reports	<input type="checkbox"/>	_____

6. Pending motions: \_\_\_\_\_ Date fully briefed: \_\_\_\_\_  
A. \_\_\_\_\_  
B. \_\_\_\_\_

7. Anticipated motions: \_\_\_\_\_ Date to be filed: \_\_\_\_\_  
A. \_\_\_\_\_  
B. \_\_\_\_\_

8. Issues at trial: \_\_\_\_\_  
\_\_\_\_\_

9. Real party in interest: \_\_\_\_\_  
Name of carrier Name of representative

10. Issues resolved, special problems, or stipulations: Attached additional page (Yes or No)? \_\_\_\_\_

11. Lowest demand \$ \_\_\_\_\_ Highest offer \$ \_\_\_\_\_

12. Waive jury (Yes or No)? \_\_\_\_\_

13. Refer to binding arbitration (Yes or No)? \_\_\_\_\_ Refer to mediation (Yes or No)? \_\_\_\_\_

I hereby stipulate under provision of Civil Rule 11 to the accuracy of the representations made herein.

Signature \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/state/zip \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail \_\_\_\_\_  
On behalf of party \_\_\_\_\_