

**STATUS CONFERENCE/CASE MANAGEMENT
CONFERENCE INFORMATION SHEET**

FROM: _____

TYPE OF HEARING: _____

DATE: _____ TIME: _____ DEPT: _____

CASE NAME: _____

CASE NUMBER: _____

COURT: _____

COURT ADDRESS/CITY: _____

YOUR FILE #: _____

ATTORNEY FOR: ___PLAINTIFF___ DEFENDANT

TEL #: () _____

FAX #:() _____

BILL TO: _____

INSTRUCTIONS:

What is the basis of this claim? _____

When will discovery be completed? _____

DAMAGES \$ _____

List of discovery still to be done? _____

DATE COMPLAINT WAS FILED? _____

When can you be ready for trial? _____

DATE SERVED? _____

How long will trial take? _____ JURY / NON-JURY
(circle one)

If not served, when can you serve? _____

NO. OF WITNESS: _____ EXPERTS: _____

Date defaulted? _____ Date answered? _____

Are you agreeable to arbitration? _____
BINDING / NON-BINDING (circle one)

Judgment papers to be submitted by? _____

Do you want a settlement conference? _____

RESULTS OF STATUS CONFERENCE/CMC

NEXT HEARING DATE: _____

TYPE OF HEARING

DATE

TIME

DEPT/DIV

NOTICE TO BE GIVEN: BY PLAINTIFF / BY DEFENDANT / BY COURT / WAIVED (circle one if applicable)

REASON FOR CONTINUANCE (if applicable): _____

COMMENTS: