PRE-TRIAL MEN		GAMING DIS	PUTES TRIAL COURT		DOCKET NO.	
GDC-55 (REV. 11/.	11)	INS	TRUCTIONS			
	and at the	y claiming damages or the	at party's attorney shall complete pa re-trial session give a copy to the jua	art I below Ige and to	DATE	
			be completed by attorney)			
PLAINTIFF		DEFENDANT #1	DEFENDANT'S TRIAL COUNSEL		PHONE NO.	
PLAINTIFF'S TRIAL COUNSEL PHONE NO.			DEFENDANT #2	DEFENDANT'S TRIAL COUNSE		PHONE NO.
RETURN DATE	DATE OF CERTIFICATE O	F CLOSED PLEADINGS DATE	TYPE OF CLAIM			TRIAL DATE
	DATE AND TIME OF A	ACCIDENT (If applicable)				
CLAIM						
(e.g. Accident)	-					
	NATURE OF DAMAGE					
DAMAGES OR				******	*****	
DEMAND (e.g. Injuries)						
IF APPLICABLE	LAST MEDICAL EXAM					
	REASON	COST		EXPLA	NATION	
	1. Doctor(s)					
	2. Hospital(s)					
SPECIALS	3. Subtotal (Add 1 &2)					
	4. Future Medical					
	5. Wages	LOST WAGES				
		FUTURE CAPACITY				
	6. OTHER (Prop. Dam.,etc.)	•	Copies of all medical bills a	nd report	s	
	7. TOTAL	\$	have been furnished to the			

have been furnished to the Defendant(s)

	(Include all and	CLAIMS (ticipated evident)		ral problems)	
NAME OF PREPARER		TELEPHO	NE NO.	ATTORNEY FOR	
		ART II (To be com			
COMP. NEGLIG.					
DEMAND	GOOD	PLAINTIFF TO REPORT TO JUDGE BY			
OFFER	FAIR	TRIAL DATE (If applicable)			
TRIAL	WEEKS BOTH COUNSEL AVAIL		THIN 30 – 60 DAYS)		
PLEADINGS AND EXHIBITS	EXHIBITS STIPULATED U	PON			
	OTHER COMM	1ENTS - DEFEND/	ANT'S CLAIMS O	F LAW, ETC.	
	OTHER COMM				
I SETTLED	TIPULATED JDGMENT WITHDRAWI	N DISM TO N	IISSED PURSUANT IRCP §40		