

IN THE CIRCUIT COURT FOR THE SECOND JUDICIAL CIRCUIT
_____ COUNTY, ILLINOIS

_____,)
)
Plaintiff,)
v.) No. _____
)
_____,)
)
Defendant.)

CASE MANAGEMENT MEMORANDUM

1. Plaintiffs: (Name) (Age) (Address)
(a) _____
(b) _____
(c) _____
2. Defendants: (Name) (Age) (Address)
(a) _____
(b) _____
(c) _____
3. Third Party Defendants: (Name) (Age) (Address)
(a) _____
(b) _____
(c) _____
4. Nature of Case: (State whether P.I., P.D., wrongful death, dram shop, etc.)
5. Factual Summary, Theory of Liability or Defense, and Theory of Damages.
6. Describe the complexity of the case.
7. Suggestions for simplification of the issues, such as date for case dispositive motions and admissions of liability.
8. Describe any amendments that are required to the pleadings.
9. Suggestions for obtaining admission of fact and of documents which will avoid unnecessary proof.
10. Suggested limitations on discovery:
 - A. Depositions to be taken:
 - (1) Number _____
 - (2) Duration _____

- B. Expert witnesses:
(1) Area(s) of expertise: _____

(2) Number _____

- C. Deadlines:
(1) Disclosure of expert witnesses:
_____, 20_____.
(2) Disclosure of other witnesses:
_____, 20_____.
(3) Completion of written discovery and depositions:
_____, 20_____.

11. Is settlement likely and the date you will be ready for settlement conference.
_____, 20_____.

12. Advisability of alternative dispute resolution.

13. Date on which case should be ready for trial.
_____, 20_____.

14. Suggested date for next case management conference.
_____, 20_____.

15. Other matters that may aid in the disposition of the action.

16. Estimated time for trial _____ days.

17. Defendant's insurance carrier:

- A. Name _____
B. Policy Limits \$_____

Attorney preparing this memorandum: _____

Client(s) represented: _____

“I certify that I am familiar with the case and authorized to act on behalf of the client represented.”

(Must be signed by attorney appearing at the case management conference.)