

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS  
COUNTY DEPARTMENT

PRE-TRIAL MEMORANDUM – GENERAL CALENDAR “J”

Plaintiff(s) )  
vs. ) NO.  
Defendant(s) ) Initial Pretrial Date: \_\_\_\_\_

(Pltf. Atty. (Trial) \_\_\_\_\_  
(Firm) \_\_\_\_\_  
(Address) \_\_\_\_\_  
(Phone) \_\_\_\_\_

Date of Occ: \_\_\_\_\_  
Loc. Of Occ: \_\_\_\_\_

Deft. Atty. (Trial) \_\_\_\_\_  
(No. 1) (Firm) \_\_\_\_\_  
(Address) \_\_\_\_\_  
(Phone) \_\_\_\_\_

Deft. Atty. (Trial) \_\_\_\_\_  
(No. 2) (Firm) \_\_\_\_\_  
(Address) \_\_\_\_\_  
(Phone) \_\_\_\_\_

Deft. Atty. (Trial) \_\_\_\_\_  
(No. 3) (Firm) \_\_\_\_\_  
(Address) \_\_\_\_\_  
(Phone) \_\_\_\_\_

Deft. Atty. (Trial) \_\_\_\_\_  
(No. 4) (Firm) \_\_\_\_\_  
(Address) \_\_\_\_\_  
(Phone) \_\_\_\_\_

Occurrence Allegations

Pltf. No. 1 Conduct: \_\_\_\_\_

Pltf. No. 2 Conduct: \_\_\_\_\_

Deft. No. 1 Conduct: \_\_\_\_\_

Deft. No. 2 Conduct: \_\_\_\_\_

Def. No. 3 Conduct: \_\_\_\_\_

Def. No. 4 Conduct: \_\_\_\_\_

Plf.'s Theory of Liability: \_\_\_\_\_

Description of Injuries: \_\_\_\_\_

MEDICAL EXPENSES:	Dates	Names	Charges
Hosp. (Emergency Room)	_____	_____	_____
Hosp. (Confinement)	_____ to _____	_____	_____
Treating Doctor	_____ to _____	_____	_____
Treating Doctor	_____ to _____	_____	_____
Treating Doctor	_____ to _____	_____	_____
X-Ray Laboratory	_____	_____	_____
Physical Therapy	_____	_____	_____
Medical Aids (Describe)	_____		_____
		<b>TOTAL</b>	<b>\$ _____</b>

**LOSS OF EARNINGS:**

From \_\_\_\_\_ to \_\_\_\_\_ employed at \_\_\_\_\_ \$ \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_ employed at \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL** \$ \_\_\_\_\_

**OTHER CLAIMED DAMAGES:**

Describe \_\_\_\_\_ \$ \_\_\_\_\_

Pltf. Demand \$ \_\_\_\_\_ Def. No. 1 Offer \_\_\_\_\_ Def. No. 2 Offer \_\_\_\_\_

Def. No. 3 Offer \_\_\_\_\_ Def. No. 4 Offer \_\_\_\_\_