

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

VS    PLAINTIFF(S)    DEFENDANT(S)	CASE NUMBER  <hr/> STATUS CONFERENCE QUESTIONNAIRE  <hr/> STATUS CONFERENCE DATE: _____ TIME: _____ PLACE: DEPARTMENT _____
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NOTICE to all counsel of record and parties in propria persona: All parties of record must completed in its entirety this Questionnaire and serve and file it directly in Department \_\_\_\_\_ at least five court days prior to the date set for the status conference. If the space *provided* for any answer is insufficient, attach additional pages *as needed*.

PARTY (i.e. Plaintiff/Defendant/Cross-Complainant) ANSWERING THIS QUESTIONNAIRE:   <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;">DATE ON WHICH THE COMPLAINT WAS FILED:</td> <td style="width: 50%; vertical-align: top;">DATE ON WHICH THE CROSS COMPLAINT WAS FILED:</td> </tr> </table>	DATE ON WHICH THE COMPLAINT WAS FILED:	DATE ON WHICH THE CROSS COMPLAINT WAS FILED:	COUNSEL FOR SUCH PARTY:
DATE ON WHICH THE COMPLAINT WAS FILED:	DATE ON WHICH THE CROSS COMPLAINT WAS FILED:		

NATURE OF THE CASE (Check the appropriate box.)

<input type="checkbox"/> VEHICULAR ACCIDENT	<input type="checkbox"/> MEDICAL MALPRACTICE	<input type="checkbox"/> BAD FAITH	<input type="checkbox"/> ASSAULT AND BATTERY
<input type="checkbox"/> SLIP AND FALL	<input type="checkbox"/> LEGAL MALPRACTICE	<input type="checkbox"/> WRONGFUL TERMINATION	<input type="checkbox"/> POLICE MISCONDUCT
<input type="checkbox"/> PREMISES LIABILITY	<input type="checkbox"/> REAL PROPERTY	<input type="checkbox"/> BUSINESS LITIGATION	<input type="checkbox"/> OTHER _____
<input type="checkbox"/> WRONGFUL DEATH	<input type="checkbox"/> PRODUCT LIABILITY	<input type="checkbox"/> BREACH OF CONTRACT	_____
	<input type="checkbox"/> CONSTRUCTION DEFECT LITIGATION	<input type="checkbox"/> COLLECTION	_____

**PARTIES - LIST THE NAME OF EACH PARTY IN THE FOLLOWING CATEGORIES**

1. PLAINTIFF/CROSS COMPLAINANT:
2. DEFENDANT/CROSS DEFENDANT WHO HAS ANSWERED OR WHOSE DEFAULT HAS BEEN ENTERED:
3. DEFENDANT/CROSS DEFENDANT WHO HAS BEEN SERVED AND HAS NOT YET FILED A RESPONSIVE PLEADING AND WHOSE DEFAULT HAS NOT BEEN ENTERED:
4. DEFENDANT/CROSS DEFENDANT WHO HAS NOT BEEN SERVED:

**RELATED CASES - SEE LOCAL RULE 7.3**

LIST ALL CASES THAT HAVE BEEN DESIGNATED AS "RELATED CASES" BY THE COURT:

ARE THERE ANY OTHER CASES THAT MAY BE RELATED CASES?  YES  NO

IF YOUR ANSWER IS "YES" SET FORTH THE CASE NUMBER OF SUCH CASE(S):

**AT ISSUE**

IS THIS CASE AT ISSUE-THAT IS, HAVE ALL DEFENDANTS ANSWERED THE COMPLAINT AND HAVE ALL CROSS DEFENDANTS ANSWERED ANY CROSS COMPLAINT AND HAVE DEFAULTS BEEN ENTERED ON ALL SERVED PARTIES WHO FAILED TO FILE RESPONSIVE PLEADINGS?

YES  NO

IF YOUR ANSWER IS "NO", SET FORTH, IN DETAIL, SPECIFIC FACTS AS TO WHY THE CASE IS NOT AT ISSUE.

**TRANSFER TO DISTRICT**

IS IT MANDATORY UNDER LASC RULE 2.0, THAT THIS CASE BE TRANSFERRED TO ANOTHER DISTRICT OF THIS COURT?  YES  NO

IF YOUR ANSWER IS "YES", WHAT IS THE PROPER DISTRICT?

**AMENDMENT OF PLEADING/CONSOLIDATION MOTIONS**

DO YOU INTEND TO MAKE ANY MOTION TO ADD A PARTY OR CAUSE OF ACTION TO A COMPLAINT OR CROSS COMPLAINT OR TO CONSOLIDATE THIS CASE WITH ANY OTHER CASE?  YES  NO

IF YOUR ANSWER IS "YES", SET FORTH IN DETAIL, SPECIFIC FACTS AS TO WHY SUCH A MOTION IS NECESSARY, INCLUDING THE NAME AND CASE NUMBER OF ANY CASE TO BE CONSOLIDATED.

**DAMAGES**

SET FORTH, IN DETAIL, THE SPECIFIC DOLLAR AMOUNTS OF DAMAGES YOU CONTEND HAVE BEEN INCURRED TO DATE, FOR WHICH THERE IS EVIDENTIARY SUPPORT (e.g. medical expenses, loss of earnings, balance owing on contract, etc.)

SET FORTH THE AMOUNTS OF ANY DAMAGES EXPECTED TO BE INCURRED IN THE FUTURE, AND STATE, IN DETAIL, SPECIFIC FACTS WHICH SUPPORT SUCH DAMAGE CLAIM.

**LIMITED JURISDICTION**

SHOULD THIS CASE BE RECLASSIFIED AS LIMITED CIVIL?  YES  NO

IF YOUR ANSWER IS "YES", SET FORTH THE PROPER COURT LOCATION:

IF YOUR ANSWER IS "NO", SET FORTH, IN DETAIL, SPECIFIC FACTS AS TO WHY THIS CASE SHOULD NOT BE RECLASSIFIED AS A LIMITED CIVIL CASE.

**ARBITRATION/MEDIATION**

HAS AN ELECTION TO ARBITRATE BEEN FILED BY PLAINTIFF?  YES  NO

IF NO ELECTION HAS BEEN FILED SHOULD THIS CASE BE SUBMITTED TO ARBITRATION PURSUANT TO C.C.P. 1141.1 0 et Seq.?  YES  NO

SHOULD THIS CASE BE SUBMITTED TO MEDIATION  YES  NO

IF YOUR ANSWER IS "NO", SET FORTH, IN DETAIL, SPECIFIC FACTS AS TO WHY THIS CASE SHOULD NOT BE SUBMITTED TO ARBITRATION OR MEDIATION.

ARE YOU WILLING TO STIPULATE TO BINDING ARBITRATION?  YES  NO

**JURY WAIVER/DEMAND -TRIAL ESTIMATE**

JURY TRIAL IS  WAIVED  DEMANDED TRIAL ESTIMATE IS \_\_\_\_\_ DAYS.

**The information contained in this questionnaire is complete and accurate and has been prepared by an attorney/party in propria persona familiar with this case.**

\_\_\_\_\_  
(NAME)

ATTORNEY FOR: \_\_\_\_\_