Form LR16.1.2. Form of Pretrial Memorandum for Use in Personal Injury Cases

IN THE UNITED STATES DISTRICT COURT

FOR THE NORTHERN DISTRICT OF ILLINOIS

_____ DIVISION

	)	Civil Action No.
	)	
	)	Judge [*Insert name of assigned judge*]
v.	)	
	)	
	)	Plaintiff requests $_____
	)	
	)	Defendant offers $_____

PRETRIAL MEMORANDUM

Plaintiff's Name: _____
Age: _____
Occupation: _____
Marital status: _____

Attorney for plaintiff [*indicate name and phone number of trial attorney*]:

_____
_
_____
_
_____
_

Attorney for defendant [*indicate name and phone number of trial attorney*]:

_____
_
_____
_
_____
_

Summary of injuries [*note especially any permanent pathology*]:

_____
_
_____
_
_____

–

Date, hour, and place of occurrence:

_____

–

Attending physicians:

_____

–

Hospitals:

_____

–

Place of employment:

_____

–

_____

–

Part A. **Compensatory Damages** [*Parts A & B are to be completed by plaintiff's counsel.*]

1. Liquidated Damages:

(a)	Medical fees	$_____
(b)	Hospital bills	$_____
(c)	Loss of income	$_____
(d)	Miscellaneous expenses	$_____
	TOTAL	$_____

2. What is the total amount of compensatory damages claimed in this action? $_____

Part B. **Punitive Damages**

a. Does the plaintiff claim punitive damages?
Yes ☐ No ☐ If yes, how much? $_____

Brief Statement of Circumstances of Occurrence:
Plaintiff's view:

_____

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_____
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_____
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_____
_

Defendant's view:

_____
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_____
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_____
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[*At the direction of the court the parties are to attach to this memorandum any medical reports or other materials useful for discussion at the pretrial conference.*]