

REQUEST FOR PROTECTION ON TRIAL LIST

TO:

| |
|----------------------------|
| Name and Address of Court: |
| _____ |
| _____ |
| _____ |
| _____ |

RE:

| |
|------------------------------|
| Docket Number and Case Name: |
| Docket No: _____ |
| Case Name: _____ |

REQUEST OF: PLAINTIFF DEFENDANT

This case is scheduled for trial list beginning: _____.

The parties' good faith credible estimate of the time required for the trial is _____ days.

The following requests for protection from trial are made for the following reasons:

| | Dates(s) Requested | REASON(S) |
|--------------------------|--------------------|-----------|
| <input type="checkbox"/> | 1. _____ | _____ |
| <input type="checkbox"/> | 2. _____ | _____ |
| <input type="checkbox"/> | 3. _____ | _____ |
| <input type="checkbox"/> | 4. _____ | _____ |
| <input type="checkbox"/> | 5. _____ | _____ |
| <input type="checkbox"/> | 6. _____ | _____ |

Date: _____ [Attorney for] Plaintiff Defendant

A REQUEST FOR PROTECTION IS ALLOWED ONLY IF THE BOX TO THE LEFT OF THE REQUEST IS CHECKED (✓). A DISALLOWED REQUEST THAT RELATES TO A SCHEDULING CONFLICT WITH ANOTHER COURT MAY BE RECONSIDERED IF IT BECOMES MORE CERTAIN THAT THE CONFLICT WILL ACTUALLY OCCUR.

Date: _____ Judge/Justice

DO NOT DOCKET