

| | | |
|--|----------------|--------------------|
| ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS): | TELEPHONE NO.: | FOR COURT USE ONLY |
| ATTORNEY FOR (NAME): | | |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF | | |
| STREET ADDRESS: | | |
| MAILING ADDRESS: | | |
| CITY AND ZIP CODE: | | |
| BRANCH NAME: | | |
| PLAINTIFF(S)/PETITIONER(S): | | |
| DEFENDANT(S)/RESPONDENT(S): | | |
| <input type="checkbox"/> AT ISSUE-MEMORANDUM <input type="checkbox"/> COUNTER AT-ISSUE | | CASE NUMBER: |

- | | |
|---|---|
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

1. Jury trial requested: Yes No 23000 and 24500/23001
2. Time estimated for trial: _____ days. 24000 If the estimate of trial time is 5 hours (1 day) or less, nonjury, and all parties join in the estimate of trial time (silence will be deemed as joining), this case will be set for trial as a short cause matter (for calendaring purposes, Desert District 2 hours or less) 24500/24501
3. Case entitled to preference Yes No Under code section: _____ 26000/26001
4. Is equitable relief sought? Yes No
5. Does the amount in controversy exceed \$50,000 as to any plaintiff? Yes No
6. Are the parties claiming an exemption from mandatory arbitration pursuant to Rule 1600.5, California Rules of Court? Yes No
7. If you are counsel for plaintiff and you are not claiming exemption, do you elect to refer matter to arbitration? Yes No
8. If you are counsel for plaintiff and do not elect arbitration, do you object to the matter being ordered to arbitration? Yes No
9. Are the pleadings proper and the issues joined? Yes No
10. Is discovery completed partially completed? List discovery to be completed and date for completion.

11. Is there any law and motion pending or contemplated? Yes No
 Has the motion been filed? Yes No Date: _____

12. If personal injury:
- a. Nature and extent of injuries: _____
 - b. Total medical expenses to date: _____
 - c. Future medical expenses: _____
 - d. Loss of earnings to date: _____
 - e. Future loss of earnings: _____
 - f. Other special or general damages: _____

13. Indicate party being represented:

| | |
|-----------------|-----------------|
| Plaintiff _____ | Defendant _____ |
| Attorney _____ | Attorney _____ |
| Firm _____ | Firm _____ |
| Address _____ | Address _____ |
| Telephone _____ | Telephone _____ |

For additional parties, please attach a separate sheet. Calendar No. _____

ACIS Code
34101
34103(02)

AT-ISSUE MEMORANDUM
(Rule 206, 207)

27000/27005
12-858-356 Rev. 2/88
SB-3

I hereby represent to the Court that this case is at issue as to all essential parties served with process or appearing therein; that no amended or supplemental complaint or cross-complaint or other affirmative pleading remains unanswered; that to my knowledge no other parties will be served with a summons prior to the time of trial, and I know of no further pleading to be filed and know of no reason why the case should not be tried as soon as the calendar of the Court will permit.

Date _____

Attorney(s)

DECLARATION OF SERVICE BY MAIL

I, _____, declare:
That _____ is and was, at all times herein mentioned, a citizen of the United States and a resident of the County of San Bernardino, over the age of eighteen years and not a party to nor interested in the within action; that his _____ business address is _____
City of _____, County of _____, State of California;
that on the _____ day of _____, _____, _____ he served the within At-Issue Memorandum upon _____
by depositing a copy thereof, enclosed in a sealed envelope with postage thereon fully prepaid, in the United States Post Office mail box at _____, addressed as follows:

I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, at _____, California.

Declarant Signature