

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name &amp; Address</i> ):  Telephone No.: _____ Fax No. (Optional): _____ E-Mail Address (Optional): _____ ATTORNEY FOR ( <i>Name</i> ): _____ Bar No: _____	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b> <input type="checkbox"/> Central Justice Center, 700 Civic Center Dr. West, Santa Ana, CA 92701-4045 <input type="checkbox"/> Civil Complex Center, 751 W. Santa Ana Blvd., Santa Ana, CA 92701-4512	
PLAINTIFF/PETITIONER:  DEFENDANT/RESPONDENT:	CASE NUMBER:
<b>STATEMENT OF COMPLIANCE</b> Unlimited Civil	Case assigned to: Judge: Department: Date complaint filed: Hearing/trial date:

This Statement of Compliance shall be executed by all counsel and filed with the court clerk in the department of the judge to whom the case has been assigned for trial.

1. Counsel has inspected all exhibits and diagrams and the exhibits are ready for premarking by the clerk. All stipulations as to admission into evidence or waiver of foundation are submitted with the exhibits(s).
2. Pretrial motions have been exchanged by all parties.
3. If trial is by jury, proposed jury instructions, proposed special findings and/or general verdict and/or special verdicts will be exchanged before the commencement of trial.
4. Joint Statement of the case and joint witness list has been prepared for submission to the court as required.\*\*
5. Counsel has prepared a joint list of controverted issues.\*\*
6. All counsel have prepared a list of stipulated facts and made a good faith effort to stipulate to as many documents, waiver of foundational requirements, etc., as reasonably possible.\*\*
7. Each party agrees that once the trial commences, witnesses shall be available to utilize to the fullest extent possible every trial day.
8. Parties have agreed on a division of jury fees (if applicable) and reporter fees, which are due each day before trial commences.

\_\_\_\_\_, Attorney for Plf/Def/X-Compl/X-Def \_\_\_\_\_ (DATE)  
 (SIGNATURE OF ATTORNEY) (NAME OF PARTY)

\_\_\_\_\_, Attorney for Plf/Def/X-Compl/X-Def \_\_\_\_\_ (DATE)  
 (SIGNATURE OF ATTORNEY) (NAME OF PARTY)

\_\_\_\_\_, Attorney for Plf/Def/X-Compl/X-Def \_\_\_\_\_ (DATE)  
 (SIGNATURE OF ATTORNEY) (NAME OF PARTY)

\_\_\_\_\_, Attorney for Plf/Def/X-Compl/X-Def \_\_\_\_\_ (DATE)  
 (SIGNATURE OF ATTORNEY) (NAME OF PARTY)

\*\*Please attach to this Statement of Compliance: Joint Statement of Case, Joint Witness List, Stipulated Facts, Requested Voir Dire Questions and List of Controverted Issues.

## STATEMENT OF COMPLIANCE