

Form LR16.1.3. Form of Pretrial Memorandum for Use in Employment Discrimination Cases

**IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF ILLINOIS**

_____ **DIVISION**

	)	Civil Action No.
	)	
	)	Judge <i>[Insert name of assigned judge]</i>
v.	)	
	)	
	)	

PRETRIAL MEMORANDUM

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

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Plaintiff's brief summary of claim and statement of employment action:

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

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Defendant's brief summary of defenses and statement of employment action:

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[Plaintiff's counsel will complete Part A, Plaintiff's Summary of Damages, and defendant's counsel will complete Part B, Defendant's Summary of Damages, Assuming Liability. As indicated in the title to Part B, defendant's counsel must complete the section using the assumption of liability, even though defendant disputes liability.]

Part A. Plaintiff's Summary of Damages

1. Lost Wages and Benefits: *[For each year for which damages are claimed, indicate (A) the total wages and benefits that would have been earned working for defendant but for the discrimination, (B) the total wages, benefits, and other income earned in substitute employment that plaintiff was able to obtain, (C) additional wages and benefits defendant maintains plaintiff could have earned, and (D) the difference between (A) and the total of [(B) + (C)].*

	A Amounts Lost Due to Discrimination	B Amounts Earned in Substitute Employment	C Additional Amounts Could Have Earned	D Difference (A-(B+C))
Year ¹⁸				
19_____	_____	_____	_____	_____
19_____	_____	_____	_____	_____
			Total Lost Wages & Benefits: \$	_____
2.	(a) Attorney Fees (to date):	\$	_____	
	(b) Costs (to date):			\$
3.	Do you claim:			
	(a) Pain, suffering, emotional injury, etc.?			
	Yes ☐ No ☐ If yes, how much?			\$
	(b) Punitive or liquidated (double) damages?			
	Yes ☐ No ☐ If yes, how much?			\$
	(c) Pre-judgment interest? ¹⁹			
	Yes ☐ No ☐ If yes, how much?			\$
4.	Do you claim any other kinds of damage?			
	Yes ☐ No ☐ If yes, what kind and how much? _____			\$
5.	Total Amount Claimed:			\$

¹⁸ Only two years are shown. Use the appropriate number of years in completing the form.

¹⁹ The inclusion of both liquidated damages and pre-judgment interest in this form is not intended to suggest that both are or are not recoverable.

Part B. Defendant's Summary of Damages, Assuming Liability *[This portion is to be completed in good faith even though defendant disputes liability.]*

1. *[For each year for which damages are claimed, indicate (A) the total wages and benefits that would have been earned working for defendant but for the discrimination, (B) the total wages, benefits, and other income earned in substitute employment that plaintiff was able to obtain, (C) additional wages and benefits defendant maintains plaintiff could have earned, (D) other amounts received, such as disability or pension payments, and (E) the difference between (A) and the total of (B) + (C) + (D).]*

	A	B	C	D
	Amounts Lost	Amounts Earned	Additional	Difference
	Due to	in Substitute	Amounts Could	(A-(B+C+D))
Year ²⁰	Discrimination	Employment	Have Earned	
19____	_____	_____	_____	_____
19____	_____	_____	_____	_____
Total Lost Wages & Benefits: \$				_____

2. Does the defendant dispute the amount claimed for attorney's fees and costs?
Yes No If yes, explain, giving estimated amount due:

\$ _____

3. Does the defendant dispute the amount claimed for pain, suffering, emotional injury, etc?

Yes ☐ No ☐ If yes, explain, giving estimated amount due:

\$ _____

4. Does the defendant dispute the claim for pre-judgment interest?

Yes ☐ No ☐ If yes, explain, giving estimated amount due:

\$ _____

5. Does the defendant dispute the claim for punitive damages?

Yes ☐ No ☐ If yes, explain, giving estimated amount due:

\$ _____

6. Does the defendant dispute any other claims for damages made by the plaintiff?

Yes ☐ No ☐ If yes, explain, giving estimated amount due:

²⁰ Only two years are shown. Use the appropriate number of years in completing the form.

—
_____ \$ _____

7. Total amount owed, assuming liability: \$ _____