**Defendant No. 1** 

## Request for Pre-Trial Conference Form 13A

## Claim no.

Plaintiff No. 2 (if applicable)	
Full Name	
Address for Service	
Phone No.	
Fax No. (If any)	
Plaintiff's Lawyer/Agent (Full Name)	
Lawyer/Agent's Address for Service	
Lawyer/Agent's Phone No.	
Fax No. (If any)	
E-Mail Address (Optional)	
	Full Name   Address for Service   Phone No.   Fax No. (If any)   Plaintiff's Lawyer/Agent (Full Name)   Lawyer/Agent's Address for Service   Lawyer/Agent's Phone No.   Fax No. (If any)

Defendant No.	. 2 (if applicable)	
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Full name	Full Name
Address for Service	Address for Service
Phone No.	Phone No.
Fax No. (If any)	Fax No. (If any)
Defendant's Lawyer/Agent (Full Name)	Defendant's Lawyer/Agent (Full Name)
Lawyer/Agent's Address for Service	Lawyer/Agent's Address for Service
Lawyer/Agent's Phone No.	Lawyer/Agent's Phone No.
Fax No. (If any)	Fax No. (If any)
E-Mail Address (Optional)	E-Mail Address (Optional)

**Note:** For additional defendants, please list on attached sheet with all the necessary information as requested above.

## TO THE COURT:

I, \_\_\_\_\_, request that a pre-trial conference be held in this proceeding.

(Signature of party, solicitor or agent)