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[YOUR NAME]
[YOUR ADDRESS]
Telephone: [YOUR PHONE NUMBER]
[YOUR E-MAIL ADDRESS]
Fax: [YOUR FAX NUMBER]

STATE OF ARIZONA
MARICOPA COUNTY SUPERIOR COURT

_____, a [single/married
man/woman],

Plaintiff,

v.

**[Name of Defendant] and Jane Doe [last
name of defendant], husband and wife;
JOHN DOES 1-5; JANE DOES 1-5;
BLACK CORPORATIONS 1-5; and
WHITE PARTNERSHIPS 1-5,**

Defendants.

Case No. CV _____

WITNESS INFORMATION FORM

(Assigned to the Honorable
[name of the judge])

The parties hereto, having conferred through their undersigned counsel authorized to make
binding stipulations, hereby submit the following Witness Information Form.

/ / /

/ / /

WITNESS INFORMATION FORM

Witnesses for Plaintiffs:

	Witness Name	Direct and Redirect	Cross

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	Witness Name	Direct and Redirect	Cross
1.	Witness A	1 hour / 30 min	45 minutes
2.	Witness B	30 min / 10 min	15 minutes
3.	Witness C	30 min / 10 min	15 minutes
4.	Witness D	15 min	Via depo

Direct, Redirect & Cross Total: 4 hours

Witnesses for Defendant:

	Witness Name	Direct and Redirect	Cross
1.	Witness E	1 hour	30 minutes
2.	Witness F	45 min / 15 min	20 minutes
3.	Witness G	45 min / 15 min	30 minutes

Direct, Redirect & Cross Total: 4 hrs

Total Witness Time Estimate: 8 hours

Time Estimate For:	Plaintiff		Defendant
Opening Statement	1 hour		1 hour
Closing Argument	1st: 1 hour	2nd: 30 minutes	1 hour

RESPECTFULLY SUBMITTED this 5st day of Novmeber, 2007.

[YOUR NAME]

LAW OFFICES OF [DEFENSE COUNSEL]

By _____

By _____

[Your name]
[Your address]
[your e-mail]
Pro Per

[Defense counsel name]
[Defense counsel address]
[Defense counsel e-mail]
Attorneys for Defendant

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ORIGINAL of the foregoing electronically
filed/delivered this ____ day of _____,
2015, to:

Clerk of the Court
Maricopa County Superior Court

The Honorable [Judge's name]
Maricopa County Superior Court
