**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**

**FAMILY COURT**

**DOMESTIC RELATIONS BRANCH**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

)

[PLAINTIFF NAME], )

)

Plaintiff ) Case No. [YEAR] DRB [####]

v. )

) Judge [NAME]

[DEFENDANT NAME] ) ) Next hearing: [DATE]

Defendant )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

**JOINT PRETRIAL STATEMENT**

The parties to the above action by their attorneys

Party Attorney

(List parties and if *pro se*, their (List attorneys and their

phone numbers) phone numbers)

[PLAINTIFF] Pro Se

(Plaintiff or “[MR/MS NAME]”) [TEL #]

[DEFENDANT] Pro Se

(Defendant or “[MR/MS NAME]”) [TEL #]

[GAL] [FIRM]

(Guardian *ad litem* for [TEL #]

[CHILD])

B. Type of Case:

\_\_\_\_\_\_ Divorce \_\_X\_\_\_ Custody

C. List of which issues are disputed:

\_\_\_\_\_\_\_ Property \_\_\_\_\_\_ Alimony ­­\_\_\_X­­­­­­­­\_\_\_ Custody \_\_\_X\_\_\_Child Support

D. Counterclaim \_\_\_X\_\_\_\_ Yes \_\_\_\_\_ No

E. Plaintiff’s Position:

Plaintiff is seeking joint legal and sole physical custody.

Physical Custody

Plaintiff is seeking sole physical custody of [CHILD]. Plaintiff is seeking visitation for defendant as follows: 1) defendant shall visit weekly with [CHILD] on [DAY] and [DAY] from [TIME] until [TIME], with pick-up occurring at [CHILD]’s day care and drop-off occurring at plaintiff’s home; 2) defendant shall visit with [CHILD] every other weekend from [DAY] at [TIME] until [DAY] at [TIME], with pick-up and drop-off occurring at [CHILD]’s day care; and 3) either party is prohibited from calling the police to escort them during a custody exchange, unless a legitimate safety concern arises during the course of the exchange.

Legal Custody

Plaintiff is seeking joint legal custody with the defendant. If the parties disagree, plaintiff is seeking final decision making over medical issues, as long as [HIS/HER] decision is consistent with the recommendations of [CHILD]’s medical team. Plaintiff is also seeking final decision-making regarding what school [CHILD] will attend.

F. Defendant’s Position:

Defendant is seeking sole physical custody and joint legal custody.

Physical Custody

Defendant is seeking sole physical custody of [CHILD]. Defendant is seeking for the plaintiff to have liberal and reasonable visitation rights, with no set visitation schedule. Defendant wants either party to be able to travel outside of the District of Columbia if the traveling party provides the other party with notice and contact information for where he or she is travelling.

Legal Custody

Defendant is seeking joint legal custody with the plaintiff. Defendant is seeking final decision making if the parties disagree regarding medical care and educational issues.

G. Guardian *ad litem*’s Position:

Guardian *ad litem* recommends that joint physical custody and joint legal custody to plaintiff and defendant is in the child’s best interests.

Physical Custody

Guardian *ad litem* recommends that plaintiff should have primary physical custody of [CHILD]. Guardian *ad litem* also recommends that defendant should have reasonable rights of visitation, to occur as follows: 1) defendant shall visit weekly with [CHILD] from [TIME] on [DAY] until [TIME] on [DAY]; 2) defendant shall visit with [CHILD] every other weekend from [DAY] at [TIME] until [DAY] at [TIME]; 3) all custody exchanges shall occur at [CHILD]’s day care; when [CHILD] reaches school age, all exchanges shall occur at [CHILD]’s school; 4) the party with physical custody of [CHILD] must a) follow the feeding schedule set by [CHILD]’s medical team and b) ensure that [CHILD] attends all recommended and scheduled therapies at [LOCATION] and/or the [LOCATION] and that an adult (either parent or nurse) accompanies [CHILD] to [HIS/HER] therapy sessions, as required; and 5) when either party has physical custody of [CHILD], they shall be permitted to travel with [CHILD] outside of D.C., provided that the parent with physical custody at that time provides the non-custodial parent with contact information for where the party is travelling and provided that the parties otherwise abide by the drop-off and pick-up times in the order.

Legal Custody

Guardian *ad litem* recommends that plaintiff and defendant have joint legal custody. Guardian *ad litem* recommends that in matters pertaining to medical issues or [CHILD]’s health, if the parties disagree, plaintiff shall make the final decision, if that decision is consistent with the recommendation of [CHILD]’s medical team or current treating physician. Guardian *ad litem* also recommends that plaintiff have final decision-making if the parties disagree regarding [CHILD]’s 1) educational placement and services; and 2) therapies, rehabilitative services, and developmental services.

H. Discovery Problems:

None

I. Outstanding Motions:

1) Defendant’s motion to modify access to children (dated [DATE])

J. Agreed Facts:

**[CHILD]’s History**

1. [CHILD]’s date of birth is [DOB].
2. [CHILD]’s medical diagnoses are [LIST DIAGNOSES].
3. [CHILD] attends [SCHOOL/DAYCARE].
4. *[ADDITIONAL AGREED FACTS RE: HISTORY REDACTED]*

**Case History**

1. Plaintiff filed a custody complaint for the minor child on [DATE].
2. Defendant filed a custody counterclaim on [DATE].
3. On [DATE], Defendant filed an emergency motion for temporary custody.
4. *[ADDITIONAL AGREED FACTS RE: CASE HISTORY REDACTED]*
5. On [DATE], the defendant filed a motion to appoint a Guardian *ad Litem*.
6. On [DATE], the defendant filed an emergency motion to modify Custody.
7. On [DATE], the court denied the defendant’s emergency motion to modify custody.
8. On [DATE], the court granted the defendant’s motion to appoint a Guardian *ad Litem*.
9. On [DATE], the court appointed [CHILD] a guardian *ad litem* from [FIRM].
10. On [DATE], the court entered a temporary visitation order that granted the defendant visitation with the minor child:
11. Every [DAY] and [DAY] from [TIME] to [TIME].
12. Every other weekend from [TIME] on [DAY] until [TIME] on [DAY].
13. *[ADDITIONAL AGREED FACTS RE: CASE HISTORY REDACTED]*

K. Disputed Facts:

[ALL FACTS AT ISSUE NOT ALREADY LISTED IN THE AGREED FACTS SECTION]

L. Unusual Legal Issues to be Raised:

[LIST, IF ANY]

M. Exhibits:

The parties request that the admissibility of the evidence listed below be dealt with as a preliminary matter.

|  |  |  |
| --- | --- | --- |
| **Exhibit #** | **Offered By** | **Brief Description** |
| P1 | Plaintiff | [YEAR] Federal and State Tax Return |
| P2 | Plaintiff | Nursing Notes |
| P3 | Plaintiff | Emails from Plaintiff to Defendant regarding: 1) feedings; 2) [CHILD]’s weight; 3) Plaintiff’s employment; and 4) doctor’s appointments |
| P4 | Plaintiff | Medical documents from Dr. [DOCTOR]’s (pediatrician) office |
| P5 | Plaintiff | Document Summarizing [CHILD]’s Daily Schedule |
| P6 | Plaintiff | Document Summarizing [CHILD]’s Medical Needs |
| P7 | Plaintiff | Letter from Plaintiff’s Therapist regarding her History of Attendance at Therapy (therapy for the purposes of improving communication and parenting skills) |
| D1 | Defendant | 25-30 Photographs |
| D2 | Defendant | 7 mini cassette tapes |
| D3 | Defendant | Video of [CHILD] at the beach |
| D4 | Defendant | Medical/educational records |
| D5 | Defendant | 2 DVDs |

1. Names of all witnesses, including experts

PLAINTIFF

Name of Witness Type of Witness (expert, fact)

1. [NAME] ([ROLE, e.g., “plaintiff’s sister”) Fact

Plaintiff reserves the right to supplement [HIS/HER] list of witnesses.

DEFENDANT

Name of Witness Type of Witness (expert, fact)

1. [NAME] (night nurse at

[HOSPITAL]) Fact

1. Officer [NAME] Fact
2. Officer [NAME] Fact
3. Officer [NAME] Fact
4. Officer [NAME] Fact
5. Nurse [NAME] ([HOSPITAL]) Fact
6. [NAME] Fact
7. [NAME] Fact

Defendant reserves the right to supplement [HIS/HER] list of witnesses.

GUARDIAN *AD LITEM*

Name of Witness Type of Witness (expert, fact)

1. [PLAINTIFF] (plaintiff) Fact
2. [DEFENDANT] (defendant) Fact

The Guardian *ad litem* reserves the right to supplement [HIS/HER] list of witnesses

O. Do the parties want the child to be interviewed?

Plaintiff: No [IMPOSSIBLE DUE TO YOUNG AGE].

Defendant: No [IMPOSSIBLE DUE TO YOUNG AGE].

Guardian *ad litem*: No [IMPOSSIBLE DUE TO YOUNG AGE].

N. Estimated Length of Trial:

Plaintiff: [TIME PERIOD]

Defendant: [TIME PERIOD] .

GAL: [TIME PERIOD]

P. Signature Line

Plaintiff: The plaintiff assisted in preparing and reviewing [HIS/HER] portion of the ` pre-trial statement. [HE/SHE] consented via phone to its filing on [DATE].

Defendant: The defendant assisted in preparing and reviewing [HIS/HER] portion of the pre-trial statement. [HE/SHE] consented via phone to its filing on [DATE].

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GUARDIAN *AD LITEM*

**CERTIFICATE OF SERVICE**

I hereby certify that a copy of the joint pre-trial statement was sent via first class mail, postage pre-paid, and emailed, on this [DAY] of [month, year] to:

[PLAINTIFF]

[ADDRESS]

*Plaintiff (Pro Se)*

[DEFENDANT]

[ADDRESS]

*Defendant (Pro Se)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ATTORNEY]