V.

Perfect 10 Inc v. Google Inc et al

Doc.

## **SEND**

UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA **CASE NUMBER** CV04-9484 NM (CWx) PLAINTIFF(S) NOTICE TO PARTIES OF ADR PILO **PROGRAM** 

Dear Counsel,

PERFECT 10

**GOOGLE INC** 

The district judge to whom the above-referenced case has been assigned is participating in an ADR Pilot Program. All counsel of record are directed to jointly complete the attached ADR Pilot Program Questionnaire, and plaintiff's counsel (or defendant in a removal case) is directed to concurrently file the Questionnaire with the report required under Federal Rules of Civil Procedure 26(f).

DEFENDANT(S).

Clerk, U.S. District Court

11/19/04

Date

By: DENISEL

Deputy Clerk

DOCKETED ON CM

NOV 2 4 2004

cc: ADR Program Coordinator

ADR-8 (01/03)

NOTICE TO PARTIES OF ADR PILOT PROGRAM

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## UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA

PERFECT 10		CASE NUMBER
v	PLAINTIFF(S)	CV04- 9484 NM (CWx)
V.  GOOGLE INC	DEFENDANT(S).	ADR PILOT PROGRAM QUESTIONNAIRE
conference or mediation? Please	e outline with specificity the t	in order to prepare adequately for a settlement type(s) of discovery and proposed completion gard. Your designations do not limit the discovery ettle.
	***************************************	
claimed [e.g., lost profits, medica	ıl expenses (past and future)	aintiff? Identify the categories of damage , lost wages (past and future), emotional distress, ges claimed attributed to each category.

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Yes [ ] No [ ]	
(4) if this case is in category civil rights - empl	oyment (442), check all boxes that describe the legal bases of
plaintiff claim(s).	
∐ Title VII	Age Discrimination
_] 42 U.S.C. section 1983	☐ California Fair Employment and Housing Act
Americans with Disabilities Act of 1990	Rehabilitation Act
Other	
I hereby certify that all parties have discussed	and agree that the above-mentioned responses are true and
correct.	
Date	Attorney for Plaintiff (Signature)
	Attorney for Plaintiff (Please print full name)
Date	Attorney for Defendant (Signature)
	Attorney for Defendant (Please print full name)