

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF GEORGIA
COLUMBUS DIVISION

JAMES EDWARD BROGDON, JR., <i>et</i>	*	
<i>al.</i> ,	*	
Plaintiffs,	*	
vs.	*	CASE NO. 4:23-CV-88 (CDL)
FORD MOTOR COMPANY,	*	
Defendant.	*	

O R D E R

The parties are notified that the Court intends to distribute the jointly proposed supplemental juror questionnaire (Exhibit A hereto) to prospective jurors upon their arrival on February 3, 2025.¹ The jurors, who will be assembled in the basement for check-in and completion of the questionnaires, will be transferred to the courtroom upon completion of the questionnaires. Copies of the questionnaires will be made and distributed to counsel. Because of the length of the questionnaires, only one copy will be provided to each side. After all jurors have been assembled in the courtroom, they will be shown the Federal Judicial Center video on jury service. After the video is finished, I will appear on the bench to welcome the jury and provide them with preliminary remarks. I will then proceed with determining whether anyone has a legal excuse. I will conduct a very limited voir dire restricted

¹ The Court overrules the objections that Ford made to some of the questions.

to their connection to any of the parties, counsel or the case. We will then take an extended break to give counsel an opportunity to finish your review of the supplemental questionnaire responses. After that break, we will resume voir dire with counsel having an opportunity to question the jury as a panel and individually. Although counsel may follow up on responses to the main and supplemental questionnaires, they shall not repeat the questions in the questionnaires. When voir dire is complete, the Court will hear motions to excuse for cause. After those motions have been decided, counsel will be provided with a peremptory challenge strike list with the names of 18 potential jurors in ascending numerical order starting with the lowest number first. Counsel will silently exercise their peremptory challenges by striking through the name on the list which they wish to excuse. The list will be passed back and forth between counsel as they alternately exercise their individual strikes. Each side will have 3 peremptory challenges. No alternates will be chosen.

IT IS SO ORDERED, this 23rd day of January, 2025.

S/Clay D. Land

CLAY D. LAND
U.S. DISTRICT COURT JUDGE
MIDDLE DISTRICT OF GEORGIA

EXHIBIT A

JOINT SUPPLEMENTAL JUROR QUESTIONNAIRE

NAME: _____

JUROR NUMBER: _____

Purpose & Instructions

To more efficiently complete jury selection, the parties have jointly designed this questionnaire to better understand your background and life experiences that could impact your jury service. It is important that you answer each of the following questions honestly and to the best of your knowledge and understanding.

Several of the following questions are included so that you will not be required to answer these matters in open court. Please note that if you do not answer a question on this questionnaire, then you may be asked that question during the general jury selection process.

1. Do you know or are you related to any of the following individuals?

- | | | |
|------------------------------|---------|--------|
| 1) James Edward Brogdon, Jr. | ___ Yes | ___ No |
| 2) Ronald Brian Brogdon | ___ Yes | ___ No |
| 3) Jason Mills | ___ Yes | ___ No |
| 4) Joshua Brooks | ___ Yes | ___ No |
| 5) Bryant Buchner | ___ Yes | ___ No |
| 6) Jonathan Eisenstat | ___ Yes | ___ No |
| 7) Brian Herbst | ___ Yes | ___ No |
| 8) Paul Lewis | ___ Yes | ___ No |
| 9) Steve Meyer | ___ Yes | ___ No |
| 10) Charles "BB" Barwick | ___ Yes | ___ No |
| 11) Max Bryant | ___ Yes | ___ No |
| 12) Eddie Ervin | ___ Yes | ___ No |
| 13) Daniel Frewell | ___ Yes | ___ No |
| 14) Ervin Flanders | ___ Yes | ___ No |
| 15) Wiley Griffin | ___ Yes | ___ No |
| 16) Randall James | ___ Yes | ___ No |
| 17) Marilyn James | ___ Yes | ___ No |
| 18) Lauren Brogdon | ___ Yes | ___ No |
| 19) Brandi Brogdon | ___ Yes | ___ No |
| 20) Jimmie Lee Cooper | ___ Yes | ___ No |
| 21) Anthony Harrison | ___ Yes | ___ No |

- | | | |
|---------------------------|------------------------------|-----------------------------|
| 22) Brian Palmer | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 23) Jacob Sanchez | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 24) Kristen Drexler | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 25) Courtney Pollock | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 26) Brett Wilkinson | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 27) Trenton Russ | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 28) Sydney Cochran | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 29) William Ellis | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 30) Carl Zaas | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 31) Sal Caruso | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 32) Jason Balzer | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 33) Joseph Weishaar | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 34) Lawrence Queener | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 35) Stephen Kozak | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 36) Ridha Baccouche | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 37) Derrick Kuzak | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 38) Harold "Gator" Bryant | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 39) Colby Swicord | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 40) Roger Burnett | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 41) Chris Eikey | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 42) Daniel Camacho | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 43) Mark Fleming | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 44) Harold Keyserling | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 45) Mark Sochor | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 46) Donald Tandy | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 47) Michelle Vogler | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you checked yes, please write the name of each person you know from the above list and describe how you know them or your relation to them.

2. Have you been represented by, worked with, or been involved in a matter where a party was represented by any of the following law firms?

- | | | |
|--|---------|--------|
| 1) Butler Prather LLP | ___ Yes | ___ No |
| 2) Page Scrantom Sprouse Tucker & Ford, P.C. | ___ Yes | ___ No |
| 3) Bondurant Mixon & Elmore LLP | ___ Yes | ___ No |
| 4) Thompson Hine LLP | ___ Yes | ___ No |
| 5) Troutman Pepper Hamilton Sanders LLP | ___ Yes | ___ No |
| 6) Huie Fernambucq & Stewart LLP | ___ Yes | ___ No |
| 7) Watson Spence LLP | ___ Yes | ___ No |
| 8) Thompson, Coe, Cousins, & Irons LLP | ___ Yes | ___ No |

If you checked yes, please write the name of the law firm(s) explain your connection(s) to the law firm(s).

3. Do you know, or are you related to, or have you been represented by any of the following lawyers?

- | | | |
|----------------------|---------|--------|
| 1) James Butler, Jr. | ___ Yes | ___ No |
| 2) Ramsey Prather | ___ Yes | ___ No |
| 3) Daniel Philyaw | ___ Yes | ___ No |
| 4) Allison Bailey | ___ Yes | ___ No |
| 5) LaRae Moore | ___ Yes | ___ No |
| 6) Michael Terry | ___ Yes | ___ No |
| 7) Frank Lowrey | ___ Yes | ___ No |
| 8) Elizabeth Wright | ___ Yes | ___ No |
| 9) Charles Peeler | ___ Yes | ___ No |
| 10) Harold Melton | ___ Yes | ___ No |
| 11) Paul Malek | ___ Yes | ___ No |
| 12) Michael Boorman | ___ Yes | ___ No |
| 13) Philip Henderson | ___ Yes | ___ No |
| 14) Michael Eady | ___ Yes | ___ No |

If you checked yes, please write the name of the lawyer(s) and explain your connection to the lawyer(s).

4. Have you or a family member ever worked for Ford Motor Company, a subsidiary of Ford Motor Company, or for a Ford dealer?

YES ___

NO ___

If yes, please list (a) your relation to the person, (b) the company the person was employed by, (c) when the person was employed with that company, (d) the location where that person worked, and (d) what position(s)/job title(s) the person held.

5. Do you have any ownership interest in Ford Motor Company or do you own Ford Motor Company stock?

YES ___

NO ___

6. Are you related to anyone who has an ownership interest in or owns Ford Motor Company stock?

YES ___

NO ___

7. Have you or a family member ever worked for an automaker (a manufacturer of cars or trucks) other than Ford Motor Company, or for a subsidiary of another automaker, or for a car or truck dealer?

YES ___

NO ___

If yes, please list (a) your relation to the person, (b) the company the person was employed by, (c) when the person was employed with that company, (d) the location where that person worked, and (e) what position(s)/job title(s) the person held.

8. Have you or a family member ever worked for a company that manufactures vehicle components or parts?

YES ___

NO ___

If yes, please state (a) your relation to the person and (b) the name of the automakers or companies.

9. Have you or a family member ever worked for a vehicle dealership?

YES ___

NO ___

If yes, please state (a) your relation to the person and (b) the name of the vehicle dealership(s).

10. Have you ever worked as a mechanic or for a vehicle body and repair shop?

YES ___

NO ___

11. Have you or a family member ever been in the car, truck, or vehicle business in any way, by owning or working for a used car dealer, or a mechanic or body shop, or an auto parts dealer?

YES ___

NO ___

If yes, please list (a) your relation to the person, (b) the company the person was employed by, (c) when the person was employed with that company, (d) the location where that person worked, and (d) what position(s)/job title(s) the person held.

12. Do you work for, have an insurance policy with, have stock in, or otherwise have any financial interest in any of the following:

- | | | |
|--|------------------------------|-----------------------------|
| 1) Allianz Underwriters Insurance Company | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2) Allianz Global Corporate & Specialty SE | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3) Lloyd's-Apollo Syndicate Management Ltd | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4) Magna Carta Insurance Ltd. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5) Ascot Bermuda Ltd. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6) Liberty Surplus Insurance Corporation | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7) Allied World Assurance Company (AWAC) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8) Arcadian Risk Capital Ltd BDA | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9) General Security Indemnity Company of Arizona
(Scor Re) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10) Scor Channel Limited, Lloyd's-Helix Underwriting
Partners Ltd. (Somers Re Ltd.) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11) Markel Bermuda Limited, Argo Re Ltd. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12) Vantage Risk Ltd. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 13) Lloyd's-MAP (Managing Agency Partners)
Syndicate 2791 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14) XL Bermuda Ltd. (AXA) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 15) Group Ark Insurance Ltd. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 16) Lloyd's-Apollo Syndicate 1969 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 17) XL Catlin Syndicate 2003 (AXA XL) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 18) Lloyd's-Inigo Syndicate 1301 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 19) QBE US Casualty Facility | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 20) Great Lakes Insurance SE (Munich Re) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 21) Liberty Specialty Markets Bermuda | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 22) Hamilton Re, Ltd. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 23) Convex Group | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 24) HDI Specialty Insurance Company | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 25) Canopus Syndicate 4444 | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 26) Emerald Underwriting Managers | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 27) Arch Reinsurance Ltd. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you checked yes, please explain your affiliation for all entities to which you are connected.

13. Have you ever worked as a lawyer, paralegal, legal assistant, or for a law firm?

YES ___

NO ___

If so, please state (a) the name of the law firm, (b) the position/job title you held, and (c) when you were employed there.

14. Are any of your family members lawyers, do they work for lawyers, do they work in the court system, or do they have regular contact with lawyers because of their work?

YES ___

NO ___

If yes, please state which family members and what they do for work.

15. Have you ever worked as an engineer or for an engineering firm?

YES ___

NO ___

If yes, please state (a) the name of the engineering firm, (b) what your job title was, and (c) and what kind of work you performed.

16. Have you ever worked for a government agency that regulates the production of vehicles or regulates the production of consumer products (i.e., National Highway Traffic Safety Administration or Consumer Product Safety Commission)?

YES ___

NO ___

If yes, please state (a) the name of the agency, (b) what your job title was, and (c) and what kind of work you performed.

17. Have you ever worked for an organization that tests vehicles for safety and that sets standards for safety performance of vehicles, such as the Insurance Institute for Highway Safety?

YES ___

NO ___

If yes, please state (a) the name of the organization, (b) what your job title was, and (c) what kind of work you performed.

18. Have you ever worked in a job that involved inspecting or testing products for safety?

YES ___

NO ___

If yes, please state (a) the name of the company/organization, (b) what your job title was, and (c) what kind of work you performed.

19. Are you familiar with the minimum Federal Motor Vehicle Safety Standards?

YES ___

NO ___

If yes, please explain how you became familiar with the minimum Federal Motor Vehicle Safety Standards.

20. Have you ever worked in a job that involved investigating vehicle wrecks?

YES ___

NO ___

If yes, please explain where you worked and what your job was.

21. Have you ever worked in a job where you took or read x-rays, CT scans, or MRIs?

YES ___

NO ___

If yes, please explain where you worked and what your job was.

Continue on the next page.

22. Do you have any work or professional experience in any of the following areas:

- a. Automotive engineering or vehicle design ___ Yes ___ No
- b. Mechanical or biomechanical engineering ___ Yes ___ No
- c. Accident reconstruction ___ Yes ___ No
- d. Medicine (including work as a doctor, nurse, pharmacist, EMT, or ambulance driver) ___ Yes ___ No
- e. Autopsies or funeral/burial services ___ Yes ___ No
- f. Law enforcement ___ Yes ___ No
- g. Risk management or insurance (including work as an insurance agent or claims adjuster) ___ Yes ___ No

If yes, briefly describe your work or professional experience in these areas.

23. Do you or a family member have any experience in vehicle (car or truck) racing or collecting?

YES ___

NO ___

If yes, please explain what that experience was.

24. Do you currently own, lease, or regularly drive (for personal use or for work) a vehicle?

YES ___

NO ___

If yes, please state that year, make, and model of the vehicle.

25. Have you ever owned, leased, or regularly driven (for personal use or for work) a vehicle designed and manufactured by Ford Motor Company?

YES ___

NO ___

If yes, please state the year, make, and model of the vehicle(s).

26. Do you consistently buy vehicles that are made only by one manufacturer (i.e., Ford, General Motors, Toyota, Honda, Volkswagen, BMW, etc.)?

YES ___

NO ___

If so, please state the name of the vehicle manufacturer and why you consistently purchase these vehicles.

27. Have you or a family member ever been involved in a vehicle wreck where you or they required emergency medical assistance or spent time in a hospital?

YES ___

NO ___

If yes, please explain what happened that required you or your family member to get emergency medical assistance or spend time in a hospital.

28. Have you ever had a family member or close friend who was killed in a vehicle (car or truck) wreck?

YES ___

NO ___

If yes, please explain who was killed and how it happened.

29. Have you ever been seriously injured or had a family member or close friend who was seriously injured in a vehicle (car or truck) wreck?

YES ___

NO ___

If yes, please briefly describe who was involved and what happened.

30. Have you, a family member, or close friend ever driven a car or truck that went off the road for any reason?

YES ___

NO ___

If yes, please briefly describe who was involved and what happened.

31. Have you, a family member, or close friend ever been involved in a vehicle wreck where the vehicle went off the road?

YES ___

NO ___

If yes, please briefly describe who was involved and what happened.

32. Have you, a family member, or a close friend ever been involved in a vehicle wreck where your vehicle rolled over?

YES ___

NO ___

If yes, please briefly describe who was involved and what happened.

33. Have you ever witnessed a wreck in which a vehicle rolled over?

YES ___

NO ___

If yes, please briefly describe who was involved and what happened.

34. Have you ever seen or witnessed a wreck in which the roof of a vehicle collapsed down into the passenger compartment?

YES ___

NO ___

If yes, please briefly describe who was involved and what happened.

35. Have you ever heard of a claim or contention that roof crush does not cause injuries even when a vehicle roof collapses?

YES ___

NO ___

If yes, please explain how you came to hear of such a claim or contention.

36. Have you ever heard of a claim or contention that prior to a roof collapsing in a rollover wreck occupants in the vehicle dive into the roof and are injured that way, rather than by the roof collapsing?

YES ___

NO ___

If yes, please explain how you came to hear of such a claim or contention.

37. Have you, a family member, or close friend ever been involved in a vehicle wreck where your seatbelt had to be cut off?

YES ___

NO ___

If yes, please explain how that came to happen.

38. Have you, a family member, or a close friend ever tucked the shoulder/torso strap of a seatbelt under your arm or behind your back while riding in a vehicle?

YES ___

NO ___

If yes, please explain who did that.

39. Have you ever been a witness in or testified in a lawsuit (at a trial or given a deposition)?

YES ___

NO ___

If yes, please explain (if you know) what kind of case you were a witness in and what the result of that case was.

40. Has your current or past employer ever been involved in a lawsuit and you were also involved in the lawsuit because of your job?

YES ___

NO ___

If yes, please explain what your involvement was and what kind of case it was.

41. Have you had any experience with the legal system in another country besides the United States?

YES ___

NO ___

42. Do you have negative views about the legal system in the United States?

YES ___

NO ___

If yes, please explain why.

43. Have you or a family member ever been severely injured or killed by any kind of product that was badly designed or defective and dangerous?

YES ___

NO ___

If yes, please explain what the product was and whether the result was a death or an injury.

44. Do you research the safety of a car or truck before buying it by looking at information from various sources (i.e., Insurance Institute for Highway Safety, Consumer Reports, etc.)?

YES ___

NO ___

If yes, please identify where you usually get such information.

45. Have you ever had a vehicle that you owned, leased, or regularly drove recalled due to a safety problem?

YES ___

NO ___

If yes, please explain what kind of vehicle it was and what the safety problem was.

46. Have you ever owned any other kind of product that was recalled due to a safety problem?

YES ___

NO ___

If yes, please explain what kind of product it was and what the safety problem was.

47. Do you consider working on vehicles, collecting vehicles, or racing vehicles to be a hobby of yours?

YES ___

NO ___

If yes, please explain what you do in this hobby.

48. How often do you exercise?

Never ___

Rarely ___

A couple times per month ___

1-3 times per week ___

3+ times per week ___

Every day ___

Other (explain): _____

49. Have you ever had a doctor tell you that you should exercise more?

YES ___

NO ___

50. How often do you smoke or use tobacco products?

Never ___

Rarely ___

Socially/on social occasions ___

A couple times per month ___

1-3 times per week ___

3+ times per week ___

Every day ___

Other (explain): _____

51. Has a doctor ever told you to quit using tobacco products or to use tobacco products less often?

YES ___

NO ___

52. Have you or a family member ever been diagnosed with a heart condition?

YES ___

NO ___

53. Have you or a family member ever been diagnosed with a fast heartbeat or tachycardia?

YES ___

NO ___

54. Have you or a family member ever been diagnosed with hypertension (high blood pressure)?

YES ___

NO ___

55. Have you or a family member ever been diagnosed with leukemia?

YES ___

NO ___

If yes, is that leukemia now in remission?

YES ___

NO ___

56. Have you or a family member ever been diagnosed with chronic obstructive pulmonary disease (COPD)?

YES _____

NO _____

57. Have you or a family member ever been diagnosed with a condition that required the use of an inhaler, PEP device, nebulizer, portable oxygen machine, or a CPAP or BiPAP machine?

YES ___

NO ___

If yes, please state (a) the relation of the person to you and (b) the name of the condition.

58. Have you unexpectedly lost a parent or family member in an accident of any kind?

YES ___

NO ___

59. More often than not, do you trust large corporations to do the right thing or the safe thing?

YES ___

NO ___

60. More often than not, do you feel that corporations put profits over safety?

YES ___

NO ___

61. In your opinion, are most lawsuits frivolous in nature?

YES ___

NO ___

62. In your opinion, do you think that too many lawsuits are filed claiming a product is defective and dangerous?

YES ___

NO ___

63. In your opinion, are there too many big jury verdicts in lawsuits?

YES ___

NO ___

64. Do you consider yourself opposed to the principle of trial by jury of American citizens?

YES ___

NO ___

65. Are you opposed to the idea that a jury of American citizens should decide who wins in a lawsuit?

YES ___

NO ___

66. Are you a member of any group that advocates for “tort reform” or in favor of “tort reform”?

YES ___

NO ___

67. Have you ever contributed money to a group that advocates for “tort reform” or that is in favor of limiting lawsuits?

YES ___

NO ___

68. In your opinion, should there be caps on the amount of money that can be awarded in lawsuits?

YES ___

NO ___

69. In your opinion, should someone other than jurors decide the amount of money to be awarded in a lawsuit?

YES ___

NO ___

I SWEAR UNDER PENALTY OF PERJURY THAT MY ANSWERS TO THE FOREGOING QUESTIONS ARE TRUE AND CORRECT.

NAME

DATE