

# Exhibit I

STATE OF MICHIGAN

IN THE CIRCUIT COURT FOR THE COUNTY OF WAYNE

TAMARA FILAS,

Plaintiff,

CASE NO. 13-000652-NI  
HON. SUSAN D. BORMAN

**PROOF OF SERVICE**

-VS-

KEVIN THOMAS CULPERT, AND  
EFFICIENT DESIGN, INC., A MICHIGAN  
CORPORATION,

Defendant.

THE UNDERSIGNED CERTIFIES THAT A COPY OF THE  
FOREGOING INSTRUMENT VS-000652-NI THE  
ATTORNEYS OF RECORD OF ALL PARTIES TO THE ABOVE  
CAUSE BY E-MAILING ON 4/19/2013 3:35:21 PM  
FILED IN MY OFFICE  
WAYNE COUNTY CLERK  
CATHY M. GARRETT  
/s/ Shannon Campbell  
Shannon Campbell

Law Offices of Williams & Baranski  
340 E. Big Beaver Road, Ste. 250  
Troy, MI 48063  
(248) 764-1127

DARYLE SALISBURY (P19852)  
Attorney for Plaintiff  
42400 Grand River Avenue, Suite 106  
Novi, MI 48375  
248-348-6820  
[darylesalisbury@att.net](mailto:darylesalisbury@att.net)

MICHAEL C. O'MALLEY (P59108)  
Attorney for Defendant Efficient Design  
1450 W. Long Lake Rd., Ste. 100  
Troy, MI 48098  
248-312-2940  
[momalley@vgqclaw.com](mailto:momalley@vgqclaw.com)

AHMED M. HASSOUNA (P67995)  
Attorney for Defendant Culpert  
340 E. Big Beaver, Suite 250  
Troy, MI 48083  
248-764-1127  
[Ahmed\\_M\\_Hassouna@Progressive.com](mailto:Ahmed_M_Hassouna@Progressive.com)

JAMES C. WRIGHT (P67613)  
Attorney for Defendant Efficient Design  
31700 Middlebelt Rd., Suite 150  
Farmington Hills, MI 48334  
(248) 851-4111 / 0100 (Fax)  
[jwright@zkact.com](mailto:jwright@zkact.com)

**NOTICE OF HEARING**

**PLEASE TAKE NOTICE** that Defendant's Motion to Compel Answers to Interrogatories & Production of Documents will be brought on for hearing on May 3, 2013, at 9:00 a.m. before the Honorable Susan D. Borman, City of Detroit, State of Michigan or as soon thereafter as counsel may be heard.

Respectfully submitted,

**LAW OFFICE OF WILLIAMS & BARANSKI**

/s/ Ahmed M. Hassouna  
By: AHMED M. HASSOUNA (P67995)  
Attorney for Defendant Culpert

DATE: April 19, 2013

Law Offices of Williams & Baranski  
340 E. Big Beaver Road, Ste. 250  
Troy, MI 48063  
(248) 764-1127

STATE OF MICHIGAN

IN THE CIRCUIT COURT FOR THE COUNTY OF WAYNE

TAMARA FILAS,  
Plaintiff,

CASE NO. 13-000652-NI  
HON. SUSAN D. BORMAN

**PROOF OF SERVICE**

-VS-

KEVIN THOMAS CULPERT, AND  
EFFICIENT DESIGN, INC., A MICHIGAN  
CORPORATION,

THE UNDERSIGNED CERTIFIES THAT A COPY OF THE  
FOREGOING INSTRUMENT WAS SERVED ON THE  
ATTORNEYS OF RECORD OF ALL PARTIES TO THE ABOVE  
CAUSE BY E-MAILING ON 4-19-13

THE STATEMENT ABOVE IS TRUE TO THE BEST OF MY  
KNOWLEDGE, INFORMATION AND BELIEF.

/s/ Shannon Campbell

Defendant.

Shannon Campbell

DARYLE SALISBURY (P19852)  
Attorney for Plaintiff  
42400 Grand River Avenue, Suite 106  
Novi, MI 48375  
248-348-6820  
[darylesalisbury@att.net](mailto:darylesalisbury@att.net)

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Attorney for Defendant  
340 E. Big Beaver, Suite 250  
Troy, MI 48083  
248-764-1127  
[Ahmed.M.Hassouna@Progressive.com](mailto:Ahmed.M.Hassouna@Progressive.com)

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31700 Middlebelt Rd., Suite 150  
Farmington Hills, MI 48334  
(248) 851-4111 / 0100 (Fax)  
[jwright@zkact.com](mailto:jwright@zkact.com)

**DEFENDANTS' MOTION TO COMPEL ANSWERS  
TO INTERROGATORIES AND PRODUCTION OF DOCUMENTS**

NOW COMES the Defendant, by and through his attorney, Ahmed M. Hassouna,  
and moves this Honorable Court to enter an Order compelling Plaintiff to make discovery and  
to respond to Interrogatories and Request for Production of Documents previously submitted  
in accordance with the Michigan Court Rules and which have not been answered to date.

Defendant further states as follows:

1. On March 22, 2013, Defendant submitted Interrogatories, Request for  
Authorizations and Request for Production of Documents to Plaintiff by enclosing same in a  
properly addressed and stamped envelope to the attorney for the Plaintiff.

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Troy, MI 48063  
(248) 764-1127

2. The Interrogatories and Requests were submitted pursuant to MCR 2.309 and the rules of this court.

3. Plaintiff(s) filed no timely objections or motion to extend time to answer. More than twenty-eight (28) days have elapsed since Interrogatories were served on Plaintiff attorney.

4. Michigan Court Rule 2.313(A) states that when a party refuses to answer Interrogatories, application for a Court order that requires the party answer may be filed and the Court shall require the party to answer.

5. The court rule further provides if the motion is granted, the court shall, after opportunity for hearing, require the party or deponent whose conduct necessitated the motion or the party or attorney advising such conduct, or both, to pay to the moving party the reasonable expenses incurred in obtaining the order, including attorneys' fees unless there was reasonable justification for the opposition to the motion.

6. MCR 2.313(B)(2)(C) states that if an Order to answer is not complied with, the Court may render a Judgment of Dismissal against the disobedient party.

**WHEREFORE**, the Defendant prays that this Honorable Court enter an Order compelling the Plaintiff to provide signed, notarized, and full and complete answers to Interrogatories and fully executed medical authorizations for all providers listed in plaintiff's answers to interrogatories within (7) days from the date of hearing of this motion. Defendant(s) further request costs of \$500 against plaintiff attorney for failing to provide said answers timely.

Respectfully submitted,

**LAW OFFICE OF WILLIAMS & BARANSKI**

/s/ Ahmed M. Hassouna

By: \_\_\_\_\_

**AHMED M. HASSOUNA (P67995)**

Attorney for Defendant Culpert

DATE: April 19, 2013

**BRIEF IN SUPPORT OF MOTION TO COMPEL  
ANSWERS TO INTERROGATORIES AND PRODUCTION OF DOCUMENTS**

**NOW COMES** the Defendant by and through its attorney, who submits that it relies on MCR 2.309 and 2.313 in support of its Motion to Compel Answers to Interrogatories and Production of Documents.

**WHEREFORE**, the Defendant prays that this Honorable Court enter an Order compelling the Plaintiff to provide signed, notarized, and full and complete answers to Interrogatories and fully executed medical authorizations for all providers listed in plaintiff's answers to interrogatories within (7) days from the date of hearing of this motion. Defendant(s) further request costs of \$500 against plaintiff attorney for failing to provide said answers timely.

Respectfully submitted,

**LAW OFFICE OF WILLIAMS & BARANSKI**

/s/ Ahmed M. Hassouna

By: \_\_\_\_\_  
**AHMED M. HASSOUNA (P67995)**  
Attorney for Defendant Culpert

DATE: April 19, 2013

Law Offices of Williams & Baranski  
340 E. Big Beaver Road, Ste. 250  
Troy, MI 48063  
(248) 764-1127

# Exhibit J

## Mandatory Creation of or Use of SCAO-Approved Forms

The following lists identify court forms that are required by court rule or statute to be: 1) approved by the SCAO; 2) used as approved by the SCAO; or 3) used in a form substantially in the form approved by the SCAO.

### **FORMS SCAO HAS BEEN MANDATED TO CREATE AND APPROVE - USE NOT MANDATORY**

Although these forms are SCAO-Approved, their use is not specifically mandated by court rule or statute. Forms are denoted with an asterisk (\*) when court rule or statute requires the use of a form substantially in the form of the SCAO-Approved form. In this particular chart, MC forms are for use in circuit, district, and probate courts; DC forms are for use in district courts, FOC forms are for use in friend of the court offices and circuit courts, and PC forms are for use in family divisions of circuit court.

MC 12\*, Request and Writ for Garnishment (Periodic), MCR 3.101(C)

MC 13\*, Request and Writ for Garnishment (Nonperiodic), MCR 3.101(C)

MC 14\*, Garnishee Disclosure, MCR 3.101(C)

MC 15, Motion for Installment Payments, MCR 3.101(C)

MC 15a, Order Regarding Installment Payments, MCR 3.101(C)

MC 16, Motion to Set Aside Order for Installment Payments, MCR 3.101(C)

MC 16a, Order on Motion to Set Aside Order for Installment Payments, MCR 3.101(C)

MC 48, Final Statement on Garnishment of Periodic Payments, MCR 3.101(C)

MC 49, Objections to Garnishment and Notice of Hearing, MCR 3.101(C)

MC 50, Garnishment Release, MCR 3.101(C)

MC 51, Order on Objections to Garnishment, MCR 3.101(C)

MC 52\*, Request and Writ for Garnishment (Income Tax Refund/Credit), MCR 3.101(C)

MC 203\*, Writ of Habeas Corpus, MCR 3.303(H) and MCR 3.304(D)

MC 258\*, Report of Nonpayment of Restitution, MCL 712A.30(18), MCL 780.766(18), MCL 780.794(18), and MCL 780.826(15)

MC 288\*, Order to Remit Prisoner Funds for Fines, Costs, and Assessments, MCL 769.11

MC 292\*, Disclosure of Employment or Contract in Michigan Public System, MCL 380.1230d(2)

DC 84\*, Affidavit and Claim, Small Claims, MCR 4.302(A), MCL 600.8401a, and MCL 600.8402

FOC 50, Motion Regarding Support, MCL 552.505(1)(d) and MCL 552.519(3)(a)(v)

FOC 51, Response to Motion Regarding Support, MCL 552.505(1)(d) and MCL 552.519(3)(a)(v)

FOC 65, Motion Regarding Parenting Time, MCL 552.505(1)(d) and MCL 552.519(3)(a)(v)

FOC 66, Response to Motion Regarding Parenting Time, MCL 552.505(1)(d) and MCL 552.519(3)(a)(v)

FOC 67, Order Regarding Parenting Time, MCL 552.505(1)(d) and MCL 552.519(3)(a)(v)

FOC 87, Motion Regarding Custody, MCL 552.505(1)(d) and MCL 552.519(3)(a)(v)

FOC 88, Response to Motion Regarding Custody, MCL 552.505(1)(d) and MCL 552.519(3)(a)(v)

FOC 89, Order Regarding Custody and Parenting Time, MCL 552.505(1)(d) and MCL 552.519(3)(a)(v)

**FORMS SCAO HAS BEEN MANDATED TO CREATE AND APPROVE - USE NOT MANDATORY  
(continued)**

- PC 117\*, Notice to Minor of Rights Regarding Waiver of Parental Consent for an Abortion, MCR 3.615(C), (D)
- PC 118\*, Request and Order for Court Appointed Attorney /Guardian Ad Litem for Waiver of Parental Consent, MCR 3.615(C), (D)
- PC 119\*, Petition for Waiver of Parental Consent for an Abortion, MCR 3.615(C), (D)
- PC 121\*, Appeal of Order Denying Petition for Waiver of Parental Consent, MCR 3.165(K)
- PC 122\*, Confidential Information for Proceedings Concerning Waiver of Parental Consent, MCR 3.615(C), (D)

**FORMS SCAO HAS CREATED AND APPROVED - USE MANDATORY**

The use of these SCAO-Approved forms, without modification, is mandated by court rule or statute. In this particular chart, MC and UC forms are for use in circuit, district, and probate courts; DC forms are for use in district courts, CC forms are for use in circuit courts, and FOC forms are for use in friend of the court offices and circuit courts.

All estate, trust, guardianship, conservatorship, and mental commitment forms, MCL 600.855 and MCL 700.3983

DCI-84, Collecting Money from a Small Claims Judgment, MCL 600.8409(2)

UC 01a and UC 01b, Uniform Law Citation, MCL 257.727c, MCL 600.8705, MCL 600.8805, and MCL 764.9f

MC 11, Subpoena (Order to Appear), MCR 2.506(D)(1)

MC 240, Order for Custody, MCR 6.106(B)(4)

\* MC 315, Authorization for Release of Medical Information, MCR 2.314(C)(1)(d) and MCR 2.314(D)(2)(b)

CC 375, Petition for Personal Protection Order (Domestic Relationship), MCL 600.2950b(1)

CC 375M, Petition for Personal Protection Order Against Minor (Domestic Relationship), MCL 600.2950b(1)

CC 376, Personal Protection Order (Domestic Relationship), MCL 600.2950b(2)

CC 376M, Personal Protection Order Against Minor (Domestic Relationship), MCL 600.2950b(2)

CC 377, Petition for Personal Protection Order Against Stalking, MCL 600.2950b(1)

CC 377M, Petition for Personal Protection Order Against Stalking by a Minor, MCL 600.2950b(1)

CC 379, Motion to Modify, Extend, or Terminate Personal Protection Order, MCL 600.2950b(3)

CC 380, Personal Protection Order Against Stalking, MCL 600.2950b(2)

CC 380M, Personal Protection Order Against Stalking by a Minor, MCL 600.2950b(2)

CC 381, Notice of Hearing on Petition for Personal Protection Order, MCL 600.2950b(1)

CC 391, Advice of Rights (Circuit Court Plea), MCR 6.302(B)

FOC 10/52, Uniform Child Support Order, MCR 3.211(D)

FOC 10a/52a, Uniform Child Support Order (No Friend of Court Services), MCR 3.211(D)

FOC 10b, Uniform Spousal Support Order, MCR 3.211(D)

FOC 10c, Uniform Spousal Support Order (No Friend of Court Services), MCR 3.211(D)

FOC 101, Advice of Rights Regarding Use of Friend of the Court Services, MCL 552.505a(8)



# Exhibit K

<b>STATE OF MICHIGAN</b> JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY PROBATE	<b>AUTHORIZATION FOR RELEASE          OF MEDICAL INFORMATION</b>	<b>CASE NO.</b>
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Court address \_\_\_\_\_ Court telephone no. \_\_\_\_\_

Plaintiff	v	Defendant
-----------	---	-----------

Probate In the matter of \_\_\_\_\_

1. \_\_\_\_\_  
 Patient's name \_\_\_\_\_ Date of birth \_\_\_\_\_

2. I authorize \_\_\_\_\_  
 Name and address of doctor, hospital, or other custodian of medical information

to release \_\_\_\_\_  
 Description of medical information to be released (include dates where appropriate)

to \_\_\_\_\_  
 Name and address of party to whom the information is to be given

3. I understand that unless I expressly direct otherwise:

- a) the custodian will make the medical information reasonably available for inspection and copying, or
- b) the custodian will deliver to the requesting party the original information or a true and exact copy of the original information accompanied by the certificate on the reverse side of this authorization.

I understand that medical information may include records, if any, on alcohol and drug abuse, psychology, social work, and information about HIV, AIDS, ARC, and any other communicable disease.

4. This authorization is valid for 60 days and is signed to make medical information regarding me available to the other party(ies) to the lawsuit listed above for their use in any stage of the lawsuit. The medical information covered by this release is relevant because my mental or physical condition is in controversy in the lawsuit.

5. I understand that by signing this authorization there is potential for protected health information to be redisclosed by the recipient.

6. I understand that I may revoke this authorization, except to the extent action has already been taken in reliance upon this authorization, at any time by sending a written revocation to the doctor, hospital, or other custodian of medical information.

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 Name (type or print) (If signing as Personal Representative, please state under what authority you are acting)

\_\_\_\_\_  
 City, state, zip Telephone no.



# Exhibit L

STATE OF MICHIGAN

IN THE CIRCUIT COURT FOR THE COUNTY OF WAYNE

TAMARA FILAS,

Plaintiff,

CASE NO. 13-000652-NI  
HON. SUSAN D. BORMAN

-vs-

KEVIN THOMAS CULPERT, AND  
EFFICIENT DESIGN, INC., A MICHIGAN  
CORPORATION,

Defendant.

13-000652-NI  
FILED IN MY OFFICE  
WAYNE COUNTY CLERK  
7/22/2013 11:03:08 AM  
CATHY M. GARRETT

---

TAMARA FILAS  
In Pro Per  
6477 Edgewood Road  
Canton, MI 48187

MICHAEL C. O'MALLEY (P59108)  
Co-Counsel for Defendant Efficient Design  
1450 W. Long Lake Rd., Ste. 100  
Troy, MI 48098  
248-312-2940

AHMED M. HASSOUNA (P67995)  
Attorney for Defendant Culpert  
340 E. Big Beaver, Suite 250  
Troy, MI 48083  
248-764-1127

JAMES C. WRIGHT (P67613)  
Attorney for Defendant Efficient Design  
31700 Middlebelt Road, Ste. 150  
Farmington Hills, MI 48334  
(248) 851-4111 / 0100 (Fax)

[Ahmed\\_M\\_Hassouna@Progressive.com](mailto:Ahmed_M_Hassouna@Progressive.com)

[jwright@zkac.com](mailto:jwright@zkac.com)

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**CONCURRENCE IN DEFENDANT EFFICIENT DESIGN, INC.'S RESPONSE TO  
PLAINTIFF'S OBJECTION TO DEFENDANT EFFICIENT DESIGN, INC.'S PROPOSED  
ORDER OF DSMISSAL WITHOUT PREJUDICE**

**NOW COMES** the Defendant, KEVIN THOMAS CULPERT, by and through his attorneys, LAW OFFICES OF WILLIAMS & BARANSKI, by AHMED M. HASSOUNA, who concurs with Defendant EFFICIENT DESIGN, INC.'S RESPONSE to Plaintiff's Objection to

Law Offices of Williams & Baranski  
340 E. Big Beaver Road, Ste. 250  
Troy, MI 48083  
(248) 764-1127

its Proposed Order of Dismissal Without Prejudice filed with this Honorable Court in this matter.

Respectfully submitted,

**LAW OFFICES OF WILLIAMS & BARANSKI**

/s/ Ahmed M. Hassouna

BY: \_\_\_\_\_

**AHMED M. HASSOUNA (P67995)**

Attorney for Defendant

Dated: July 22, 2013

**Law Offices of Williams & Baranski**  
340 E. Big Beaver Road, Ste. 250  
Troy, MI 48063  
(248) 764-1127

# Exhibit M



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**FW: Filas: 3RD PARTY RELEASE.7-19-2012**

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Terry Cochran &lt;TCochran@cochranfoley.com&gt;

Thu, Jul 19, 2012 at 9:30 AM

To: Tamara Filas's e-mail redacted

Dear Ms Filas,

Please find attached Def Culpert's release consistent with his offer to settle. After I received the release, I called Attorney Hassouna and asked if he had spoken to his Clt about the other two conditions outlined in my prior e-mail. Attorney Hassouna indicated that he had draft answers to our interrogatories and that Mr. Culpert was on his way to work but was not in the scope and course of his employment at the time of the accident. In addition, he is checking to make sure that Mr. Culpert is the sole owner of the vehicle.

Thank you,

Terry L. Cochran  
Cochran, Foley & Associates, P.C.  
15510 Farmington Road  
Livonia, Michigan 48154  
(734) 425-2400  
tcochran@cochranfoley.com

---

**From:** Ahmed M Hassouna [mailto:[Ahmed\\_M\\_Hassouna@Progressive.com](mailto:Ahmed_M_Hassouna@Progressive.com)]**Sent:** Thursday, July 19, 2012 9:18 AM**To:** Terry Cochran**Subject:** Filas: 3RD PARTY RELEASE.7-19-2012

Terry:

Please see attached. Please advise as to whether your client will execute the attached Release in order to fully resolve this matter. Thanks.

Best,

-A

Ahmed M. Hassouna, Esq.

Law Offices of Mark E. Williams

Salaried Employees of Progressive Casualty Insurance Company



## RELEASE

For the Sole Consideration of TWENTY THOUSAND AND 00100 (\$20,000.00) DOLLARS, the receipt and sufficiency whereof is hereby acknowledged, the undersigned hereby releases and forever discharges KEVIN THOMAS CULPERT, his heirs, executors, administrators, agents and assigns claimed liable or who might be claimed to be liable, none of whom admit any liability to the undersigned but all expressly deny any liability, from any and all claims, demands, damages, actions, causes of action or suits of any kind or nature whatsoever, and particularly on account of all injuries, known and unknown, both to person and property, which have resulted or may in the future develop from an accident which occurred on or about February 19, 2010 in the City of Romulus, County of Wayne, State of Michigan.

Nothing in this release shall be construed as having any effect on any claims that undersigned releasor may have for first-party no fault benefits under the Michigan No Fault Act, MCL § 500.3101, *et seq.*

**THE UNDERSIGNED HEREBY DECLARES AND REPRESENTS** that the injuries sustained are or may be permanent or progressive; and that recovery is or may be uncertain or indefinite. In making this Release it is understood and agreed that the undersigned relies wholly upon his own judgment, belief and knowledge of the nature, extent, effects and duration of said injuries and liability. This release is made without reliance upon any statement or representation of the party or parties hereby released, their representatives or by any physician/surgeon that examined undersigned on their behalf.

Undersigned hereby declares that the terms of this settlement have been completely read and are fully understood and voluntarily accepted for the purpose of making a full and final compromise adjustment and settlement of any and all

claims, disputed or otherwise, on account of the injuries and damages above mentioned, and for the express purpose of precluding forever any further or additional claims arising out of the aforesaid accident

Undersigned hereby accepts draft or drafts as final payment of the consideration set forth above.

I have hereunto set my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 201\_.

X \_\_\_\_\_  
TAMARA FILAS, Plaintiff

Subscribed and sworn to before me  
this \_\_\_\_ day of \_\_\_\_\_, 201\_.

\_\_\_\_\_  
NOTARY PUBLIC  
\_\_\_\_\_ County, Michigan  
My Commission Expires \_\_\_\_\_

**IN THE PRESENCE OF TERRY L. COCHRAN**, Attorney for the signing party to this Release, who has fully explained the terms of this agreement and acknowledges understanding by the signing party as to the finality of the settlement and the terms thereof against KEVIN THOMAS CULPERT.

\_\_\_\_\_  
TERRY L. COCHRAN (P35890)  
Attorney for Plaintiff

# Exhibit N

STATE OF MICHIGAN  
IN THE CIRCUIT COURT FOR THE COUNTY OF WAYNE

Tamara Filas v Meemic Ins  
Case type: 1<sup>st</sup> & 3rd

No. 11-014149-NF

Filing Date: 11/15/2011

SCHEDULING ORDER

At a session of the Court held in the CAYMC, Detroit, MI on February 14, 2012

Present: HONORABLE SUSAN D. BORMAN  
CIRCUIT COURT JUDGE

IT IS HEREBY ORDERED:

- A. **WITNESS LISTS** shall be exchanged and filed with this Court by: 4/17/12  
See MCR 2.401(1)(2). ANY WITNESS NOT LISTED IN ACCORDANCE WITH THIS RULE WILL BE PROHIBITED FROM TESTIFYING AT TRIAL EXCEPT WHERE GOOD CAUSE IS SHOWN.
- B. **DISCOVERY CUT-OFF.** Discovery shall be completed by: 6/17/12  
**DISCOVERY MOTIONS (hearings at 10:30). Must be heard** two weeks before the end of discovery. **THE JUDGE WILL NOT ENTERTAIN DISCOVERY MOTIONS AFTER THE CLOSE OF DISCOVERY.** Attorneys for all parties must be present in Court to modify this scheduling order which must be done by motion (**hearings at 11:00**).
- C. **SECOND STATUS CONFERENCE:**
- D. **CASE EVALUATION: week of 7/9/12** **SPECIAL PANEL:**  
NO-FAULT CASE EVALUATION AWARDS INCLUDE ALL BENEFITS INCURRED, INCLUDING ATTORNEY FEES AND INTEREST, TO THE DATE OF THE CASE EVALUATION UNLESS STIPULATED BY THE PARTIES IN WRITING.
- E. **SETTLEMENT CONFERENCES. ALL LEAD TRIAL COUNSEL (COUNSEL WITH THE LOWEST P NUMBER) AND PARTIES MUST BE PRESENT.** All persons necessary and with authority to settle this matter up to the Plaintiff's good faith demand or case evaluation amount, whichever is higher, including lien holders, must be present. **PLEASE BE PREPARED TO BE PRESENT ALL DAY IF NECESSARY.**  
**1<sup>st</sup> Settlement Conference Date: 8/14/12 at 9:30 a.m.**  
**2<sup>nd</sup> Settlement Conference Date: 8/20/12 at 2 pm.** NOTE: Medicare lien? (If yes, Plaintiff must IMMEDIATELY begin the process to determine the amount of lien.) Jury Trial? \_\_\_\_  
Trial will follow on the Monday after the 2<sup>nd</sup> Settlement conference unless otherwise determined by the Court. Trial adjournment will be by motion only and for good cause shown. This serves as your Notice of Trial pursuant to MCR 2.501(C).
- F. **DISPOSITIVE MOTIONS MUST BE HEARD BY THE FRIDAY BEFORE THE FIRST SETTLEMENT CONFERENCE DATE.**
- G. **BRIEFS:** A maximum of 15 pages. **REPLY BRIEFS:** Maximum of 5 pages. 12 Point font double spaced. **Non-conforming briefs will be rejected.** Include complete case citations with page numbers. Please provide copies of all State and Federal cases cited, as well as statutes, which support the merits. All exhibits must be tabbed.
- H. **FINAL PRETRIAL ORDER** is due at the 2nd Settlement Conference.
- I. **EXTENSION OF DATES** will be granted by Motion only (NOT BY STIPULATION). ATTORNEYS for all parties **MUST BE PRESENT** in Court to modify this scheduling order. **Counsel hereby acknowledge receipt of these rules and schedule controlling the proceedings:**

Susan D. Borman: \_\_\_\_\_

Attorney(s) for Plaintiff

Attorney(s) for Defendant

Signature: \_\_\_\_\_

Terry Cochran

Chris Lawicki for Simeon Orlowski/Ahmed Hassouna

# Exhibit O

**HIPAA Privacy Authorization**  
**For Disclosure of Protected Health Information**  
**Relevant to Litigation, Pending Claims or Intent to Sue**

Patient's Name: Tamara Filas  
Address: 6477 Edgewood, Canton, MI 48187  
Date of Birth: redacted  
Social Security No.: XXX-XX- redacted

1. I make this authorization for the purpose of copying records in connection with a lawsuit or claim to which I am a party.
2. This authorization is directed to and applies to protected health information maintained by:

**Dr. Jon Wardner/Associates in Physical Medicine and Rehabilitation**

(Hospital, Physician, Medical provider, etc.)

3. I hereby authorize the above, its director, administrative and clinical staff or assignees, medical information services and billing department to release any and all medical records and information from my date of birth to the present unless specified otherwise, relating to my care and treatment, including x-rays, photographs, electronic and digital files and any other records, unless I expressly direct or specify otherwise. I understand that medical information may include records, if any, relating to treatment for alcohol and drug abuse protected under the regulations in 42 C.F.R. Part 2; psychiatric/psychological services and social work records and any information regarding communicable diseases and infections, defined by Michigan Department of Public Health rule, which can include tuberculosis, venereal diseases, sexually transmitted diseases, acquire immunodeficiency syndrome (AIDS), human immunodeficiency virus (HIV) or ARC.
4. This information is to be released for copying purposes to James C. Wright of ZAUSMER, KAUFMAN, AUGUST & CALDWELL, P.C.
5. I understand that information used or disclosed pursuant to this authorization may be disclosed by the recipient and may no longer be protected by the Federal Privacy Rules.
6. This authorization shall be in force and in effect until the conclusion of the pending litigation or claim unless otherwise specified.
7. I understand that I have the right to revoke this authorization at any time. I understand that if I revoke this authorization, I must do so in writing and send it to the hospital, doctor, or other custodian of medical information. I understand that the revocation will not apply to information that has already been released in response to this authorization.
8. I understand that authorizing the release of this health information is voluntary and that I need not sign this form in order to ensure health care treatment, eligibility for benefits, payment or health plan enrollment.
9. A copy of this authorization is as valid as the original.

**All Pertinent Sections Of This Form Must Be Completed Before Signing**

Subscribed and sworn to before me  
this \_\_\_\_ day of \_\_\_\_\_, 2013

\_\_\_\_\_  
Notary Public  
\_\_\_\_\_  
County, Michigan  
My Commission Expires: \_\_\_\_\_

X \_\_\_\_\_  
Signature of Patient or Legal Representative

\_\_\_\_\_  
Print Name of Patient or Legal Representative

\_\_\_\_\_  
Description of Legal Representative's Authority  
or Relationship