For help in completing this form, click on the yellow question marks or comment symbol for instructions. Please make sure that your Highlight Fields option is on so that the fields that need to be completed are light blue in color on the form. Turn it on by clicking on the Highlight Fields button that is on the far right side of the purple message bar

	COUNTY OF		—X
V	Plaintiff(s)	,	REQUEST FOR PRELIMINARY CONFERENCE
=	- VS -		Index No.:
V	Defendant	t(s).	—X
	The undersigned hereby requests a pro		
	<ul><li>action are as follows:</li><li>□ Attorney for Plaintiff(s)</li><li>□ Plaintiff(s), Pro se</li></ul>		<ul><li>□ Attorney for Defendant(s)</li><li>□ Defendant(s), Pro se</li></ul>
	<u> </u>		( ) -
	<u>( ) - </u>		( <u>)</u>
	Dated:, 20		Signature
			Print Name

SUPREME COURT OF THE STATE OF NEW YORK