**United States District Court  
Middle District of Florida  
Orlando Division**

**,**

**Plaintiff,**

**v. Case No:**

**,**

**Defendant.**

*PROPOSED*

SCHEDULING ORDER FOR A  
CLAIM-REVIEW CASE FILED UNDER E.R.I.S.A.

|  |  |
| --- | --- |
| Deadline for filing of the administrative record:  Deadline for filing of Plaintiff’s opening brief:  Deadline for filing of Defendant’s brief:  Deadline for filing of Plaintiff's reply brief:  Deadline for Mediation:  Mediator: |  |

Signed:

Counsel for Plaintiff: Counsel for Defendant:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

Bar Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bar Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number:\_\_\_\_\_\_\_\_\_ Telephone Number: \_\_\_\_\_\_\_\_\_\_\_

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

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_