IN THE IOWA DISTRICT COURT IN AND FOR WARREN COUNTY

JAMES HEADRICK,

Plaintiff,

No. LACV037468

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VERDICT

ISMAEL FIGUEROA,

Defendant.

Question No. 1: Was the Defendant at fault in his operation of his motor vehicle?

ANSWER: <u>465</u> ("yes" or "no")

[If your answer is yes, go to Question 2. If your answer is no, do not answer any further questions - just sign the verdict form]

Question No. 2: Was the fault of defendant a cause of any item of damage to plaintiff?

ANSWER: Yes ("yes" or "no")

Ilf your answer is yes, go to Question 3. If your answer is no, do not answer any further questions - just sign the verdict form]

Question No. 3: Was plaintiff at fault in his operation of his motor vehicle?

ANSWER: Yes ("yes" or "no")

[If your answer is yes, go to Question 4. If your answer is no, do not answer Question Nos. 4 or 5 but instead proceed to Question No. 6]

Question No. 4: Was the fault of plaintiff a cause of any damage to plaintiff?

ANSWER: YES ("yes" or "no")

[If your answer is yes, go to Question No. 5. If your answer is no, do not answer Question No. 5 but instead proceed to Question No. 6]

Question No. 5: Using 100% as the total combined fault of plaintiff and defendant which was a cause of plaintiff's damage, what percentage of such combined fault do you assign to the plaintiff and what percentage of such combined fault do you assign to the defendant?

ANSWER:

Plaintiff

60_%

Defendant

<u>40</u>%

Total

100%

[If you find plaintiff to be more than 50% at fault, do not answer Question No. 6]

Question No. 6: State the amount of damages, if any, sustained by the Plaintiff by

Defendant's fault as to each of the following items of damage. If the Plaintiff has failed to prove any item of damage, or has failed to prove that any item of damage was caused by Defendant's fault, enter "0" for that item.

A١	ıs	w	E	R:

Past medical expenses \$_ (Stipulated to be \$306,078.04)

Future medical expenses

\$_____

Past loss of earnings

\$_____

Future loss of earnings

Φ_____

Past pain and suffering

Future pain and suffering

\$_____

Past loss of function - mind & body

Φ_____

Future loss of function - mind & body

\$

TOTAL (add separate items)

\$

FOREMAN or FOREWOMAN*

*To be signed only if verdict is unanimous

E-FILED

WARREN

Juror**	Juror**	ıror**	
Juror**	Juror**		
Juror**	Juror**		
Juror**			

^{**}To be signed by the jurors agreeing thereto after six hours or more of deliberation.