

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF IOWA  
EASTERN DIVISION

BY \_\_\_\_\_

STEVEN G. MOLITOR,

Plaintiff,

vs.

LAURA ANN WEBER,

Defendant.

No. C02-1018

VERDICT FORM

QUESTION NO. 1. Did plaintiff prove that the defendant was negligent in the operation of her vehicle on March 13, 2001?

Answer "Yes" or "No"

ANSWER: Yes

[If your answer is "yes," then answer Question No. 2. If your answer is "no," do not answer any further questions, just sign this form below.]

QUESTION NO. 2. Was the negligence of the defendant a proximate cause of injury to the plaintiff?

Answer "Yes" or "No"

ANSWER: Yes

[If your answer is "yes," then answer Question No. 3. If your answer is "no," do not answer any further questions, just sign this form below.]

(CONTINUED...)

VERDICT FORM (Cont'd)

**QUESTION NO. 3.** Did Laura Weber prove that Steven Molitor was negligent? (See Instruction No. 4)

Answer "Yes" or "No"

ANSWER: Yes

[If your answer is "yes," then answer Question No. 4. If your answer is "no," then go on to Question No. 6.]

**QUESTION NO. 4.** Was the negligence of the plaintiff a proximate cause of any damage to the plaintiff?

Answer "Yes" or "No"

ANSWER: Yes

[If your answer is "yes," then answer Question No. 5. If your answer is "no," then go on to Question No. 6.]

**QUESTION NO. 5:** Using 100% as the total negligence of plaintiff and defendant which was a proximate cause of damage to the plaintiff, what percentage of total negligence do you assign to the plaintiff and what percentage of the total negligence do you assign to the defendant?

ANSWER:

Plaintiff Steven Molitor	<u>15</u> %
Defendant Laura Ann Weber	<u>85</u> %
TOTAL	100%

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

VERDICT FORM (Cont'd)

**QUESTION NO. 6:** State the amount of damages sustained by the plaintiff for each of the following items of damage. Do not take into consideration any reduction of damages due to plaintiff's negligence. If the plaintiff has failed to prove any item of damage, enter a "0" for that item.

- |   |    |             |
|---|----|-------------|
| 1. Past medical expenses                                | \$ | <u>2000</u> |
| 2. Loss of future earning capacity                      | \$ | <u>0</u>    |
| 3. Past loss of full body                               | \$ | <u>0</u>    |
| 4. Physical and mental pain and suffering in the past   | \$ | <u>0</u>    |
| 5. Physical and mental pain and suffering in the future | \$ | <u>0</u>    |
| <b>TOTAL (add the separate items of damage)</b>         | \$ | <u>2000</u> |