

Disclosure report

Name of court Romford	Claim No. E02YM867
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To be completed by, or on behalf of,

Citizen + Beneficiary + Father + Sale
Negligence Claimant Mr Sham Sood

who is [1st][2nd][3rd][](Claimant)(Defendant)
[Part 20 claimant] in this claim

1. Please describe in the table below (or in a separate document filed with this report), using the number 1, 2 etc., all documents which exist or may exist and which may be relevant to the issues in the case and in respect of each such document, where and with whom it may be found, and in the case of electronic documents how the same are stored.

No.	Document description	Where it may be found	(if an electronic document) how it is stored
	All Connected Cases Court Records	Law Courts in All Cases	ask the Law Courts
	All Connected Cases Party Records	All Parties in All Cases	In Progress Scanning for Claimant
	All Connected Case Witness Records	All Witnesses in All Case	ask the Witnesses

Note: If an Electronic documents questionnaire (Form N264) has been exchanged, it must be filed with this report.

2. Please state in the box below the broad range of costs that could be involved in giving standard disclosure in this case, including the costs of searching for and disclosing any electronically stored documents.

Costs Assessment Impossible

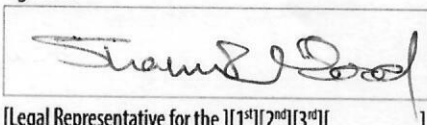
3. To the extent that this is not already dealt with in Section D4 of your Directions Questionnaire, please state in the boxes below your proposed directions for disclosure to include what particular scope and form of disclosure and related directions you propose for yourself and the other parties by reference to CPR 31.5 (6) and (7) and if not standard the broad range of costs for disclosure.

If not standard, broad range of costs	Form of disclosure (CPR 31.5 (6))
Costs Assessment Impossible	Full Disclosure

Other disclosure directions (CPR 31.5 (7))

I believe that the facts stated in this Disclosure Report are true.

Signature



[Legal Representative for the] [1st][2nd][3rd][]
[Claimant][Defendant][Part 20 claimant]

Date

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Your name and full postal address

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