STATE OF ILLINOIS	)
	) SS
COUNTY OF MCHENRY	)

# IN THE CIRCUIT COURT OF THE TWENTY-SECOND JUDICIAL DISTRICT McHENRY COUNTY, ILLINOIS

PAUL DULBERG,

Plaintiff(s),

CASE NO. 12LA000178

VS.

DAVID GAGNON, Individually, and as Agent of CAROLINE MCGUIRE and BILL MCGUIRE, and CAROLINE MCGUIRE and BILL MCGUIRE, Individually,

Defendant(s).

## NOTICE OF TAKING DEPOSITION(S)

PLEASE TAKE NOTICE that the undersigned attorney will take the deposition of:

NAME:

David Gagnon

DATE:

Wednesday, October 31, 2012

TIME:

1:00 p.m.

PLACE:

Q & A Reporting Service

7115 Virginia Road

Suite 105

Crystal Lake, Illinois, 60014

YOU ARE HEREBY requested pursuant to ILSC Rule 204 to produce the above listed deponent for the purpose of discovery deposition at the above listed time and place before Merrill Legal Solution, certified shorthand court reporters, or some other office duly authorized by law to take depositions.

The deponents are requested, pursuant to Illinois Supreme Court Rule 204, to produce the following documents and/or tangible things at the aforesaid time and place:

Any and all documents disclosed in Plaintiff's answers to interrogatories and response to Defendant's request for production of documents.

I HEREBY CERTIFY that on September 5, 2012 , a true and correct copy of the foregoing Notice of Taking Deposition was mailed to:

Hans A. Mast Law Offices of Thomas J. Popovich, P.C. 3416 W Elm St McHenry IL 60050

Attorney for Plaintiff(s) Paul Dulberg

Cicero, France, Barch & Alexander PC 6323 East Riverside Blvd Rockford, IL 61114

Attorney for Co-Defendants, Caroline and Bill McGuire

LAW OFFICE OF M/GERARD GREGOIRE

200 N LaSalle St Ste 2650

Chicago, IL 60601/1092 Telephone: /312-538-9821

By:

PERRY A ACCARDO

Firm No. 46878

Attorney Bar No.: 6228720 Attorney for Defendant(s):

David Gagnon

#### **ANSWER:**

18. State the name and address of any physician, ophthalmologist, optician or other health care professional who performed any eye examination of you within the last five years and the dates of each such examination.

#### **ANSWER:**

19. State the name and address of any physician or other health care professional who examined and/or treated you within the last 10 years and the reason for such examination and/or treatment.

### ANSWER:

- 20. Pursuant to Illinois Supreme Court Rule 213(f), provide the following:
  - (a) List the name(s) and address(s) of each lay witness(s) and identify the subjects on which the witness(s) will testify;
  - (b) List the name(s) and address(s) of each independent witness(s) and identify the subjects on which the witness(s) will testify and the opinions the party expects to elicit;
  - (c) List the name(s) and address(s) of each controlled expert witness(s) and identify:
    - (i) The subject matter on which the witness(s) will testify;
    - (ii) The conclusions and opinions of the witness(s) and the bases therefore;
    - (iii) The qualifications of the witness(s), and
    - (iv) Any reports prepared by the witness(s) about the case.

## **ANSWER:**

21. List the names and addresses of all other persons (other than yourself and persons heretofore listed) who have knowledge of the facts of the occurrence and/or of the injuries and damages claimed to have resulted therefrom.

## ANSWER:

22. Identify any statements, information and/or documents known to you and requested by any of the foregoing interrogatories which you claim to be the work product or subject to any common law or statutory privilege, and with respect to each interrogatory, specify the legal basis for the claim as required by Illinois Supreme Court Rule 201(n).

# ANSWER:

Under penalties as provided by law pursuant to 735 ILCS 5/1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that he/she verily believes the same to be true.

BILL MCGUIRE