

Claim Submission Form

1. Name (First, Middle, Last and Maiden): \_\_\_\_\_

\_\_\_\_\_

2. Current Address: \_\_\_\_\_

Previous Address:

\_\_\_\_\_

\_\_\_\_\_

Previous Address:

\_\_\_\_\_

\_\_\_\_\_

3. Telephone number: (home) \_\_\_\_\_

(work) \_\_\_\_\_

Other means of contact (i.e. e-mail, cell phone, pager etc...) \_\_\_\_\_

\_\_\_\_\_

4. Social Security Number: \_\_\_\_\_

5. Driver's License Number/Passport/Texas I.D. Card: \_\_\_\_\_

6. Have you ever been convicted of a felony or misdemeanor? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please describe giving County, State, Case number, Style and nature of offense:

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7. Have you ever been arrested? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please describe (county, state, nature of arrest): \_\_\_\_\_

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8. Current Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Start Date: \_\_\_\_\_

If you are not currently employed, are you seeking employment? What steps have you taken toward employment? \_\_\_\_\_

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Past Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Reason for Separation: \_\_\_\_\_

Beginning/End Date: \_\_\_\_\_

Past Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Reason for Separation: \_\_\_\_\_

Beginning/End Date: \_\_\_\_\_

Past Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Reason for Separation: \_\_\_\_\_

Beginning/End Date: \_\_\_\_\_

Past Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Reason for Separation: \_\_\_\_\_

Beginning/End Date: \_\_\_\_\_

9. Have you ever been fired? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please explain: \_\_\_\_\_

\_\_\_\_\_

10. Have you ever received Psychiatric or mental health care? Yes \_\_\_ No \_\_\_

If so, please explain basis of care: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. Are you currently taking any medications? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please list medication(s): \_\_\_\_\_

\_\_\_\_\_

12. Are you currently or have you ever been involved in any lawsuit in any capacity?

Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please explain nature of lawsuit and the court in which they occurred:

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\_\_\_\_\_

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13. What harm are you complaining of? \_\_\_\_\_

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14. Who do you expect to be the potential Defendant(s) in this potential lawsuit? Please list name of company or individual, address, telephone number, boss'/supervisor's name etc. \_\_\_\_\_

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15. Do you have any witnesses, documents, audio or video tapes which you believe can corroborate all or part of your complaint? \_\_\_\_\_

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16. How has this situation affected you (personally or professionally)? \_\_\_\_\_

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17. What are your expectations in filing a lawsuit? \_\_\_\_\_

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18. What are your estimated damages? \_\_\_\_\_

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19. What is your net worth? \_\_\_\_\_

20. What is the net worth of potential Defendant(s)? \_\_\_\_\_

21. How did you hear about Kilgore & Kilgore PLLC? \_\_\_\_\_

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