

## DISCOVERY QUESTIONNAIRE

**\* Please answer the following questions regarding this legal matter. Call our office if you have any questions.**

1A. List your full name, date of birth, place of birth, social security number, and driver's license number.

1B. List \_\_\_\_\_ [decedent] full name, date of birth, place of birth, social security number, and driver's license number.

1C. List \_\_\_\_\_ [heir] full name, date of birth, place of birth, social security number, and driver's license number.

2A. List the addresses and years where you lived during the past 15 years.

2B. List the addresses and years where \_\_\_\_\_ [decedent] lived during the past 15 years.

2C. List the addresses and years where \_\_\_\_\_ [heir] lived during her lifetime.

3. List names, addresses, and years of each school attended by \_\_\_\_\_ [decedent] and the highest level of education attained by him at each school.

4. List each marriage \_\_\_\_\_ [decedent] had and to whom he was married, when the marriage took place, where the marriage took place, and the names, addresses, and ages of each of \_\_\_\_\_ [decedent] children.

5A. List names and addresses of your employers for the past 15 years, dates of employment, job titles, names of supervisors, and your reasons for leaving.

5B. List names and addresses of your \_\_\_\_\_ [decedent] employers for the past 15 years, dates of employment, job titles, names of supervisors, and his reasons for leaving.

6A. Did you or your daughter ever file for any disability benefits or social security benefits of any kind? If so, please state what types of benefits were applied for and any benefits that you have received.

6A. Did \_\_\_\_\_ [decedent] ever file for any disability benefits or social security benefits of any kind? If so, please state what types of benefits were applied for and any benefits that he has received.

7A. Were you ever a party to any civil lawsuit of any kind? If so, please list the location of each court proceeding, the court name, the nature of the lawsuit or proceeding, the docket number, the parties to the case, and the outcome of the case.

7B. Was \_\_\_\_\_ [decedent] ever a party to any civil lawsuit of any kind? If so, please list the location of each court proceeding, the court name, the nature of the lawsuit or proceeding, the docket number, the parties to the case, and the outcome of the case.

7C. Was \_\_\_\_ [heir] ever a party to any civil lawsuit of any kind? If so, please list the location of each court proceeding, the court name, the nature of the lawsuit or proceeding, the docket number, the parties to the case, and the outcome of the case.

8. List the names and addresses of all health care providers who ever treated \_\_\_\_\_ [decedent], including all physicians, chiropractors, hospitals, clinics or other inpatient facilities where he was a patient for the past 20 years and the reason for treatment.

9. Please send any correspondence or documents that you have received since the wreck regarding this matter, including all insurance papers, life insurance papers, bills, etc.

10. List the names of any defendants or others who have made statements to you or your daughter regarding the wreck, state what the person said, and the place and time of the statement.

11. Please gather all photographs and videotapes of \_\_\_\_\_ [decedent].

12. Please state whether \_\_\_\_\_ [decedent] had ever been involved in any accidents or incidents resulting in personal injuries of any kind.

13. Please list the activities that \_\_\_\_\_ [decedent] was involved in, including hobbies, volunteer work, church attendance, family activities, etc.

14. Please list each health condition that \_\_\_\_\_ [decedent] had in the last 20 years of his life.

15 Have you or \_\_\_\_\_ [heir] given anyone a written or oral statement regarding the accident? If so, to whom?

16. Please send us a copy of \_\_\_\_\_ [decedent]' automobile policy.

17. Please send us copies of any W2's or 1099 forms for \_\_\_\_\_ [decedent] the past five years.

18. Please send us copies of any notes, diaries, or journals you or your daughter have kept regarding the incident.

19. Please send us a copy of \_\_\_\_\_ [decedent]' health insurance policy.