



PERSONAL INJURY STANDARD REQUEST LIST

1. Demographic Information for Plaintiff including:
 - a) Name
 - b) Date of birth
 - c) Gender
 - d) Date of injury/ last day worked
 - e) Educational background- Highest level of education completed (list degrees)
 - f) Professional Licenses or Certifications held
2. A description of any relevant health issues of the individual prior to the injury including relevant personal habits such as smoking, drinking, hobbies, sports activities, etc.
3. Family members' personal statistics, if applicable:
 - a) Names
 - b) Relation
 - c) Date of birth
 - d) Educational background- Highest level of education completed (list degrees)
 - e) Professional Licenses or Certifications held
4. Employment information as of the date of injury **and** subsequent to the injury:
 - a) Occupation
 - b) Employer
 - c) Date of hire
 - d) Union Affiliation, if any
5. Individual income information for the injured party for each of the five years prior to the injury, and all years subsequent to the injury. This may be contained on Federal income tax returns and W-2s, end-of-year **as well as** the final paycheck stubs, and/or the Social Security Earnings Statement.
6. A list of hourly wage rates from the date of hire to the date of injury, with effective dates for each new rate and the job classification associated with each wage rate **as well as** the actual hourly rates in that job classification post-injury.
7. Union contract in effect at the time of the injury **and** subsequent to the injury, if applicable.

8. Time records that would describe hours worked per week, both regular and overtime for five years before **and** subsequent to injury if applicable.
9. A list of the **employer's** annual costs of fringe benefits including:
 - a) Medical insurance plan
 - b) Dental insurance plan
 - c) Vision insurance plan
 - d) Bonuses
 - e) 401(k) plan
 - f) Pension/ Retirement plan
 - g) Profit sharing
10. If the injured party is re-employed, please provide similar information for the offsetting occupation.
11. Documentation of current social security or disability benefits received, if applicable.
12. A copy or summary of applicable bills related to any specific out-of-pocket expenses related to the injury, including medical costs and costs related to the purchase of health care coverage.
13. A copy of the Rehabilitation Report/ Vocational Report/ Life Care Plan, if applicable.
14. If the injured party will have a claim for loss of household services, please see the next page and submit any relevant information.
15. A copy of the Complaint.
16. Any relevant depositions.
17. Finally, please provide specific information including discovery and trial dates, Judge, locations of trial, attorneys on the opposing side, etc. This is very helpful for proper schedule and record keeping.

Household Services Questionnaire

Please provide a description of the household services/ hours that the injured party provided, or the impact on services still provided. This information will be helpful in the analysis of the economic damages that have been sustained.

Household Activities: Household activities are those done by persons to maintain their households. These include housework; cooking; lawn and garden care; petcare; vehicle maintenance and repair; home maintenance, repair, decoration, and renovation; and household management and organizational activities (such as filling out paperwork, balancing a checkbook, or planning a party).

Please continue on another page if necessary.

Purchasing Goods and Services: This category includes purchases of goods, professional and personal care services, household services, and government services. Professional services include childcare, financial services and banking, legal services, medical and adult care services, real estate services, and veterinary services. Activities classified here include time spent paying, meeting with, or talking to service providers, as well as time spent receiving the service or waiting to receive the service. Time spent arranging for and purchasing household services provided by someone else also is classified here. Household services include housecleaning; cooking; lawncare and landscaping; pet care; tailoring, laundering, and dry cleaning; vehicle maintenance and repairs; and home repairs, maintenance, and construction. This category also captures the time spent obtaining government services and purchasing government-required licenses or paying fines or fees.

Please continue on another page if necessary.

Caring for and Helping Household members: Time spent doing activities to care for or help any child (under age 18) or adult in the household, regardless of relationship to the respondent or the physical or mental health status of the person being helped, is classified here. Primary childcare activities include time spent providing physical care; playing with children; reading to children; assistance with homework; attending children's events; taking care of children's health needs; and dropping off, picking up, and waiting for children. Caring for and helping household members also includes a range of activities done to benefit adult members of households, such as providing physical and medical care or obtaining medical services.

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