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**NON-GOVERNMENT EMPLOYEE'S  
INITIAL CONSULTATION QUESTIONNAIRE  
(CONFIDENTIAL)**

**PLEASE PRINT**

1. Name: \_\_\_\_\_

Preferred Pronouns: \_\_\_\_\_

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

\_\_\_\_\_

City State Zip County

3. Home Phone ( ) \_\_\_\_\_; Work Phone: ( ) \_\_\_\_\_ ext \_\_\_\_\_;

Fax: ( ) \_\_\_\_\_; E-Mail : \_\_\_\_\_;

Cell Phone ( ) \_\_\_\_\_

4. Please provide the following information concerning your **current** employer/agency:

a. Name: \_\_\_\_\_

b. Address: \_\_\_\_\_

\_\_\_\_\_

City State Zip County

c. Date of hire: \_\_\_\_\_

d. Your position: \_\_\_\_\_

e. Salary: \_\_\_\_\_

f. Immediate Supervisor: \_\_\_\_\_

Name

Title

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g. Do you work as a contractor (directly or indirectly) for a federal agency?

\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If yes, name and address of agency: \_\_\_\_\_

5. If your employment problem is with a **different** employer/agency than you described in answering #4, then please provide the following information about the employer/agency with whom you had the problem:

a. Name: \_\_\_\_\_

b. Address: \_\_\_\_\_

\_\_\_\_\_

City State Zip County

c. Date of hire: \_\_\_\_\_

d. Your position: \_\_\_\_\_

e. Salary: \_\_\_\_\_

f. Immediate Supervisor: \_\_\_\_\_

Name Title

g. Date of termination or resignation: \_\_\_\_\_

h. Do you work as a contractor (directly or indirectly) for a federal agency?

\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If yes, name and address of agency: \_\_\_\_\_

**\*\*\*NOTE: All of the following questions concern the employer/agency with whom you had the employment problem**

6. How long were you (or have you been) employed by this employer/agency?

\_\_\_\_\_

7. Specific date of hire: \_\_\_\_\_

8. Have you been (and date): a. Terminated? \_\_\_\_\_

Effective date: \_\_\_\_\_ Date notified: \_\_\_\_\_

b. Suspended? \_\_\_\_\_

Effective date: \_\_\_\_\_ Date notified: \_\_\_\_\_

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- c. Demoted? \_\_\_\_\_  
Effective date: \_\_\_\_\_ Date notified: \_\_\_\_\_
  
- d. Denied promotion? \_\_\_\_\_  
Date notified: \_\_\_\_\_
  
- e. Not selected for a job you applied for? \_\_\_\_\_  
Date notified: \_\_\_\_\_
  
- g. Other? \_\_\_\_\_  
Effective date: \_\_\_\_\_ Date notified: \_\_\_\_\_

9. What was the stated reason(s) for the above action(s)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. What is the name of the person who notified you of the adverse decision?  
\_\_\_\_\_

11. What is this person's position? \_\_\_\_\_

12. Who do you think really made the decision - the person who really wanted you terminated, disciplined, not promoted, etc.? (Also, identify that person's race, sex, age and national origin.) \_\_\_\_\_  
\_\_\_\_\_

13. What do you think is the biggest real reason for that person's decision? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. In case of nonselection, what job were you seeking? \_\_\_\_\_

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- 15. In case of nonselection what was the salary for the job you were seeking? \_\_\_\_\_
- 16. How much, if any, severance pay were you given (in case of termination)? \_\_\_\_\_
- 17. Have you signed a release, waiver, settlement or any other agreement? \_\_\_\_\_
- 18. Have you found other employment? \_\_\_\_\_
  - a. Yes (if so, new salary) \_\_\_\_\_
  - b. No but expect to soon \_\_\_\_\_
  - c. No and do not expect to soon \_\_\_\_\_

- 19. Do you believe your case may involve any of the following (yes, no or maybe)?
  - a. Sex discrimination? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - b. Sexual harassment? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - c. Sexual orientation? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - d. Gender expression/gender identity? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, name, sex and job title of everyone who sexually harassed you:

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- e. Race/color discrimination? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, identify the name, race/color of the person(s) who discriminated against you:

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What is the race/color of your replacement or person promoted in your place, etc?

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What is your race and color?

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f. National Origin discrimination? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If "yes," what is the name and national origin of the person(s) who discriminated against you?

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What is the national origin of your replacement or person promoted in your place, etc?

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What is your national origin? \_\_\_\_\_

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g. Age discrimination? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, identify the age of the person(s) who discriminated against you?

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What is the age of your replacement or person promoted in your place, etc?

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What is your age and date of birth?

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h. Disability discrimination? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, what is your disability? \_\_\_\_\_

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Did the employer/agency know you had a disability? \_\_\_\_\_

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i. Religious discrimination? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, identify the name and religion of the person(s) who discriminated against you?

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What is the religion of your replacement or person promoted in your place, etc?

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What is your religion?

\_\_\_\_\_

j. Reprisal/retaliation for engaging in protected EEO activity?

\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If "yes," describe your prior protected EEO activity: \_\_\_\_\_

\_\_\_\_\_

k. Any of the following: sexual preference; personal appearance; marital status; political affiliation; union membership; family obligations? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

Describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

l. Reprisal for whistleblowing? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If "yes," describe the matter you disclosed and to whom you made the disclosure

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

When did you blow the whistle? \_\_\_\_\_

If "yes," have you filed a complaint of whistleblower reprisal? \_\_\_\_\_ yes \_\_\_\_\_ no

Where was the complaint filed? \_\_\_\_\_

When filed? \_\_\_\_\_

What is the current status of that complaint? \_\_\_\_\_

Does your case involve any false claims against the government (for example, a claim for payment by a government contractor or government grantee containing false information)?

\_\_\_\_\_ yes \_\_\_\_\_ no

**If yes, please fill out pages 11-12 Question 29.**

Does your case involve any securities law violations? \_\_\_\_\_ yes \_\_\_\_\_ no

**If yes, please fill out pages 13-14 Question 30.**

Does your case involve any income tax law violations? \_\_\_\_\_yes \_\_\_\_\_no

**If yes, please fill out page 15 Question 31.**

m. Denial of leave, or reprisal for requesting or taking leave, under the Family Medical Leave Act?:  
\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

n. Reprisal for refusing to perform an illegal act? \_\_\_\_\_yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, what did you refuse to do? \_\_\_\_\_

\_\_\_\_\_

When did you refuse? \_\_\_\_\_

o. Reprisal for filing a workers' compensation claim? \_\_\_\_\_

p. Reprisal for any legally protected activity such as filing a grievance or appeal, or working on behalf of a union? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If "yes," please explain the "protected activity" if not already described in this questionnaire, the date of that activity, and why you think you are being retaliated against.

\_\_\_\_\_

\_\_\_\_\_

q. Have you requested a reasonable accommodation for disability or for religion? \_\_\_\_\_ yes  
\_\_\_\_\_ no \_\_\_\_\_ maybe

If so, what was accommodation requested and the religion/disability involved?

\_\_\_\_\_

\_\_\_\_\_

When did you make the request? \_\_\_\_\_

r. Discrimination based on pregnancy, or denial of reasonable accommodation for pregnancy or lactation? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

s. Discrimination based on genetic information? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, what was the genetic information? \_\_\_\_\_

\_\_\_\_\_

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t. Discrimination for uniformed service? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If "yes," what is the issue?

\_\_\_\_\_

u. Denial, revocation or suspension of a security clearance, eligibility to hold a critical sensitive position, or similar credential? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If "yes," what is the credential?

\_\_\_\_\_

When was the credential denied, suspended or revoked?

\_\_\_\_\_

v. Disclosures of confidential medical information or Privacy Act violations?  
\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If "yes," what is the violation?

\_\_\_\_\_

When did the violation occur?

\_\_\_\_\_

w. Discrimination based on any other protected category or status?  
\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, what was the protected category or status?

\_\_\_\_\_

\_\_\_\_\_

In what city, county and state do you reside?

\_\_\_\_\_

In what city, county and state was your workstation located?

\_\_\_\_\_

Approximately how many employees does your employer have?

At your workstation: \_\_\_\_\_ Overall: \_\_\_\_\_

x. Other (please specify)? \_\_\_\_\_

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20. a. Have you filed a complaint of discrimination with the EEOC?  
\_\_\_\_\_ yes \_\_\_\_\_ no If "yes," date filed: \_\_\_\_\_
- b. Date of charge filed with any state, county or municipal antidiscrimination agency:  
\_\_\_\_\_
- c. What is the status of your complaint? \_\_\_\_\_
21. Date (if applicable) of Determination Letter from EEOC or other antidiscrimination agency:  
\_\_\_\_\_
22. Are (were) you a member of a bargaining unit, in other words, is (was) your position covered by a union contract? \_\_\_\_\_ yes \_\_\_\_\_ no
23. If your answer to Question #22 was yes, please answer questions a-f below. If you answered "no" to Question #22, then skip down to Question #24.
- a. Name of Union: \_\_\_\_\_ Local # \_\_\_\_\_
- b. Name of union president or steward: \_\_\_\_\_
- c. Are you a union member? \_\_\_\_\_ yes \_\_\_\_\_ no
- d. Do you have a copy of the union contract? \_\_\_\_\_ yes \_\_\_\_\_ no
- e. Have you filed a grievance under the union contract concerning the matter you are here to see us about? \_\_\_\_\_ yes \_\_\_\_\_ no
- f. What is the current status of that grievance? \_\_\_\_\_
24. Date of last performance appraisal: \_\_\_\_\_ Rating? \_\_\_\_\_
25. Date of last promotion: \_\_\_\_\_ Date of last within-grade increase: \_\_\_\_\_
26. Does your company have an employee or personnel handbook? \_\_\_\_\_ yes \_\_\_\_\_ no
27. Did you have an employment contract with this company? \_\_\_\_\_ yes \_\_\_\_\_ no
- Did you have a mandatory arbitration agreement with this company? \_\_\_\_\_ yes \_\_\_\_\_ no
- Did you have a noncompete agreement with this company? \_\_\_\_\_ yes \_\_\_\_\_ no



Please only fill out this page if you answered "yes" to Question #19L concerning false claims against the government. If you answered "no" to that question or false claims are otherwise not involved in your case, please skip this page.

29. What kind of fraud did you discover?

A. False statements related to the payment of federal or state money?

- i. False statements on a Medicare, Medicaid, TRICARE, or other health care payment request made to the United States or a state government? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- ii. False statements on any other invoice or payment demand to the United States or a state government? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- iii. False statements in documents used to support an invoice or claim for payment to the United States or a state government? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- iv. False statements to obtain a government contract? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

For each question that you answered "Yes," describe what the statement was, why the statement was false, who made the statement, and how the statement affected the United States' or state government's decision to pay.

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B. False statements to avoid a federal or state fine or penalty (including penalties for breach of contract)?  
\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, describe what fine or penalty was avoided, why the statement was false, who made the statement, how the false statements enabled the fine or penalty to be avoided.

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C. Conspiracy or collusion between bidders on a federal or state government contract to inflate their bids?  
\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, describe how the contractors colluded to inflate their bids, including any communications between the bidders.

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Please only fill out this page if you answered "yes" to Question #19L concerning false claims against the government. If you answered "no" to that question or false claims are otherwise not involved in your case, please skip this page.

D. Did you discovery evidence of any kickbacks for Medicare/Medicaid services?

- i. Offering, soliciting, paying, or receiving anything of value for referring Medicare/Medicaid patients to certain doctors, hospitals, or pharmacies? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- ii. Offering, soliciting, paying, or receiving anything of value for performing specific procedures on Medicare/Medicaid patients? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- iii. Offering, soliciting, paying, or receiving anything of value for using or prescribing specific drugs or products to Medicare/Medicaid patients? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- iv. Referring Medicare/Medicaid patients to a facility in which the referring doctor has a financial interest? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

For each question that you answered "yes," describe what was offered, solicited, paid, or referred; who made and who received the offer, solicitation, payment, or referral.

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E. Explain how you discovered the fraud or kickback that you described above.

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F. Are you aware of any public disclosures of the fraud or kickback that you discovered (e.g. in a newspaper article, judicial proceeding, or government report)? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe  
If so, state where it was publicly disclosed, when the disclosure happened, and your involvement in the disclosure (if any).

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G. Who else knows about the fraud or kickback that you discovered and how did they find out?

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H. Has anyone else filed a complaint about the fraud or kickback you discovered?

\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, state who filed the complaint, where was it filed, and when was it filed.

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I. How much money did the federal and/or state government(s) pay as a result of the fraud you discovered?

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Please only fill out this page if you answered "yes" to Question #19L concerning securities law violations. If you answered "no" to that question or securities law violations are otherwise not involved in your, please skip this page.

30. What kind of securities violation did you discover?
- A. False and/or omitted required information in a company's quarterly report(s), annual report(s), and/or other communications to shareholders? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - B. False and/or omitted required information in a company's official reports and/or other communications to the SEC? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - C. Share price and/or market manipulation? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - D. Illegal trading (insider trading, trading on embargoed information, unauthorized trading, churning, etc.)? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - E. Breached of fiduciary duties to shareholders and/or clients? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - F. Illegal accounting practices? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - G. Illicit payments to foreign officials to influence their official acts or decisions in violation of the Foreign Corrupt Practices Act? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
  - H. Other security violations? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

For each question that you answered "yes," describe how the conduct you observed violated securities laws.

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- I. Explain how you discovered the securities violation that you described above.  

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- J. Are you aware of any public disclosures of the securities violation that you discovered (e.g. in a newspaper article, judicial proceeding, or government report)? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, state where it was publicly disclosed, when the disclosure happened, and your involvement in the disclosure (if any).

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- K. Who else knows about the securities violation that you discovered and how did they find out?  

---

- L. Has anyone else filed a report or complaint about the securities violation you discovered?  
\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

If so, state who filed the report or complaint, where was it filed, and when was it filed.

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- M. How many shareholders and/or clients are affected by the securities violation you discovered?  

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Please only fill out this page if you answered "yes" to Question #19L concerning securities law violations. If you answered "no" to that question or securities law violations are otherwise not involved in your, please skip this page.

N. How much money is involved in the securities violation you discovered?

\_\_\_\_\_

O. At the time you discovered the securities violation, were you a member, officer, or employee of:

- a. The Department of Justice? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- b. The Securities and Exchange Commission? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- c. The Public Company Accounting Oversight Board? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- d. A self-regulatory organization? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- e. Any other private or public entity that regulates the kind of transaction at issue in the securities violation (e.g. FINRA)? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- f. A law enforcement organization? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

For each question that you answered "yes," explain what role, if any, your employment had in your discovery of the securities violation and whether your employer has any role in regulating the kind of transaction involved in the securities violation you discovered.

\_\_\_\_\_

\_\_\_\_\_

P. To what extent, if any, did you personally participate in the securities violation you discovered?

\_\_\_\_\_

\_\_\_\_\_

Q. Have you been convicted of, or face prosecution for, any crime related to the securities violation you discovered?

\_\_\_\_\_

R. Did you discover the violation as part of an audit under section 10A of the Securities Exchange Act (15 U.S.C. § 78j-1)? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

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**Non-Government Employee's Initial Consultation Questionnaire (Confidential)**

**Please only fill out this page if you answered "yes" to Question #19L concerning income tax law violations. If you answered "no" to that question or income tax law violations are otherwise not involved in your, please skip this page.**

31. What kind of tax fraud did you discover?

- A. Underreported income? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- B. Claiming improper deductions and/or credits? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- C. Incorrect reporting of business losses, expenses, or other accounting fraud? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- D. Domestic income hidden in foreign bank accounts? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- E. Impersonation of charitable or other non-taxable organization? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- F. Misuse of trusts or other non-taxable instruments? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe
- G. Other tax fraud? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

For each question that you answered "yes," describe how the conduct you observed constituted tax fraud.

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H. Explain how you discovered tax fraud that you described above.

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I. Are you aware of any public disclosures of the tax fraud that you discovered (e.g. in a newspaper article, judicial proceeding, or government report)? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe  
If so, state where it was publicly disclosed, when the disclosure happened, and your involvement in the disclosure (if any).

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J. Who else knows about the tax fraud that you discovered and how did they find out?

---

K. How much money is involved in tax fraud you discovered?

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L. To what extent, if any, did you personally participate in the tax fraud you discovered?

---

M. Have you been convicted of, or face prosecution for, any crime related to the tax fraud you discovered?

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32. Have you ever declared bankruptcy or are you planning to do so?  
\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

33. Have you ever declared bankruptcy or are you planning to do so?  
\_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ maybe

34. Have you consulted with any other attorneys concerning the matter you are here to see us about?  
\_\_\_\_\_ yes \_\_\_\_\_ no

If "yes", with whom have you consulted? \_\_\_\_\_  
\_\_\_\_\_

35. Are you currently represented in this matter by any other attorney? \_\_\_\_\_yes \_\_\_\_\_no

Name of current attorney: \_\_\_\_\_

Briefly describe why are seeking to consult a different attorney: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

36. Who referred you to this law firm? \_\_\_\_\_

37. What remedies do you seek to obtain through an attorney? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

38. Are you aware of any kind of deadline with respect to your need for legal advice or representation? If so, please explain briefly. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***I understand that I am here for an initial consultation only and that Passman & Kaplan, P.C, or any of its attorneys, has not undertaken to represent me until a written agreement is entered into by me and the firm.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



