

CLASS ACTION QUESTIONNAIRE

NAME OF FIRM _____
(Please Print)

Please attach a separate narrative if more room is needed to provide a complete answer.

1. Please provide a narrative of your Class Action/Mass Tort background and experience.

2. Do you refer cases to other firms in other jurisdictions? YES NO
If yes, please indicate where: _____

A. Do you retain a fee for such referrals? YES NO

B. Do you continue to work on the case after referral? YES NO

C. Do you use written contracts? (Attach a sample contract) YES NO

D. Do you require a certificate or other evidence of insurance? YES NO

3. If you are not the sole attorney, do you send your clients a letter outlining the specific scope of your representation?
(i.e. – do you advise them which tasks you are NOT performing, etc?) YES NO
If “No”, please explain why you do not feel it’s necessary

4. Please describe how you handle potential class members who choose to opt out of the class to pursue an individual claim. {Rule 23(b) (3) class actions}

5. Do you use third parties to search and notify class members, process claims forms; provide helpline services for class member questions?
A. Do you require your final approval on all notices documents and planning? YES NO

B. Please attach a list of third parties generally used and what they do.

6. Do you provide a website or toll free numbers to gather information, documents and claims forms? YES NO

A. Please attach a list of such website URL’s

7. Do notices including Summary Notices include Rule 23 elements? YES NO

8. Do you utilize the Federal Judicial Centers illustrative forms for class action notices? YES NO

9. Do you have automated Docket, Conflict and Communication systems? YES NO
If not, please explain how you control dates, conflicts and communications

Sign & Date in ink.

Signed by: _____ Title: _____

Print Name: _____ Date: _____

Class Action/Mass Tort Questionnaire

JLT Facilities, Inc.

Applicant/Firm Name: _____

Date Representation Began	Type of Case	Capacity of Firm: LC – Lead Counsel CLC – Co-Lead Counsel LCO – Local Counsel Only	Client: P-Plaintiff D – Defendant Type of business	Was the class certified? Y/N	Total # of class members	Number of class members represented	Total damages for all class members	Current status

Print Name: _____

Date: _____