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**EnterpriZ**<sup>®</sup>  
ECONOMIC CONSULTING LLC

<b>To:</b>	EnterpriZ Economic Consulting LLC	<b>From:</b>	
<b>Phone</b>	(828) 268-0102	<b>Phone</b>	
<b>Fax</b>	(828) 268-0101	<b>Fax</b>	
<b>Date</b>		<b>Email</b>	

Please answer as many questions as possible and include relevant parts of interrogatives, your notes, etc. and / or a brief letter with this correspondence.

<b>GENERAL CASE INFORMATION</b>		
Name or Title of Case _____		
Case Jurisdiction and Location _____		
You represent the: <input type="checkbox"/> Plaintiff or <input type="checkbox"/> Defense		Your firm's Case No. _____
Case Type: <input type="checkbox"/> Personal Injury <input type="checkbox"/> Wrongful Termination <input type="checkbox"/> Wrongful Death or <input type="checkbox"/> Other _____		
<b>INFORMATION ABOUT YOUR CLIENT</b>		
First Name _____		
Middle _____	Last Name _____	
<b>STATISTICAL INFORMATION</b>		
Race: <input type="checkbox"/> Caucasian <input type="checkbox"/> African American <input type="checkbox"/> Other _____		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth ____/____/____	<input type="checkbox"/> Date of Injury, <input type="checkbox"/> Termination, or <input type="checkbox"/> Death ____/____/____	
Names and birth dates of spouse and all children _____		
_____		
Educational attainment of your client (If a minor, fill in parents' education and occupations)		
_____		
<b>EARNINGS HISTORY</b>		
<i>Fill out applicable information about your client or the decedent. Attach any supporting Documents such as 1040's, W-2's or income statements.</i>		
<b>Year</b>	<b>Income</b>	<b>Occupation &amp; Circumstances</b>
2021		
2020		
2019		
2018		
2017		
2016		

(Include additional pages if needed)

**EARNING HISTORY (CONTINUED)**

Fringe Benefits—*Most employees are unaware of the type and value of their employer paid fringe benefits. Be sure to mark all the applicable types of benefits received before your client's losses.*

<i>Did your client or the decedent have:</i>	<u>Include</u>	<u>Exclude</u>
● Legally Required Benefits (FICA, unemployment, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
● Insurance: Life, Health, Disability, etc.	<input type="checkbox"/>	<input type="checkbox"/>
● Retirement and Savings	<input type="checkbox"/>	<input type="checkbox"/>
● Paid Leave & Supplemental Pay	<input type="checkbox"/>	<input type="checkbox"/>

**SUMMARY**

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**BILLING INFORMATION**

Please pay EnterpriZ Economic Consulting LLC:

- \$3,000 pure Economic Loss Report
- \$1,800 pure Analysis of a Life Care Plan
- \$750 pure Related Revision