

BASIC INFORMATION CHECKLIST

1. Information re: deceased	(a) Name (b) Date of birth (c) Type of accident (d) Dates of accident and death
2. Background information	Purpose of report, date report required, status of litigation, and anticipated trial commencement/mediation date
3. Deceased's former employment/self-employment information	(a) Name of employer/business and date of hire/business commencement (b) Position and functions prior to death (c) Details re: deceased's career aspirations and retirement plans
4. Details re: surviving spouse, minor children and/or other dependents	Names and dates of birth Income and employment information re: surviving spouse Reasons why older children or others are dependent
5. Documentation/ other information (If available and relevant)	Personal tax returns, T4 slips and Notices of Assessment (ideally for 5 years prior to the date of death)
	In the case of self-employment, corporate financial statements and tax returns (ideally for 5 years prior to the date of death)
	Curriculum Vitae (résumé) and/or details re: deceased's education, employment and earnings history
	Familial/ replacement services and care needs/cost report
	Employee benefits booklet and/or annual pension statement
	Examination for discovery transcripts
6. Client contact information (if appropriate)	Other relevant reports and documentation (employer paid employee benefit details, collective agreement, reduced life expectancy estimate, reports to be responded to and/or critiqued, parental and sibling education information in the case of injured minors etc.)
6. Client contact information (if appropriate)	Phone, cell and email
7. Sundry relevant information and/or fact specific considerations	Provide explanation

The above noted basic checklist, for either Plaintiff or Defense assignments, is not exhaustive and additional specific information may be required. Feel free to contact our office should additional explanation or clarification be required.

PERSONAL INJURY
BASIC INFORMATION CHECKLIST

1. Plaintiff's personal information	(a) Name of plaintiff (b) Date of birth (c) Date and type of accident
2. Background information	Purpose of report, date report required, status of litigation, and anticipated trial commencement/mediation date
3. Plaintiff's employment/self-employment information	(a) Name of employer/business and date of hire/business commencement (b) Position and functions at date of accident (c) Details re: career prospects/aspirations and retirement plans (d) Details re: post-accident work absences
4. Collateral benefits received	Details re: short term disability, long term disability, CPP disability and Income Replacement Benefits applied for and received (include relevant correspondence)
5. Documentation/ other information (if available and relevant)	Personal tax returns, T4 slips and Notices Of Assessment (ideally for 5 years prior to the accident) If plaintiff was self-employed, corporate financial statements and tax returns (ideally for 5 years prior to the accident) Curriculum Vitae (résumé) and/or details re: education, employment and earnings history Future Care needs/cost report Copy of relevant correspondence including additional information requests by insurer or their representatives Employee benefits booklet and/or annual pension statement Examination for discovery transcripts Other relevant reports and documentation (employer paid employee benefit details, collective agreement, reduced life expectancy estimate, reports to be responded to and/or critiqued etc.)
6. Client contact information (if appropriate)	Name, phone, cell and email
7. Sundry relevant information and/or fact specific considerations	Provide explanation

The above noted basic checklist, for either Plaintiff or Defense assignments, is not exhaustive and additional specific information may be required. Feel free to contact our office should additional explanation or clarification be required.