

# Confidential Questionnaire



Full Name: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Telephone Number: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Company you worked for: \_\_\_\_\_

At what office / plant location did you work? \_\_\_\_\_

How many employees worked for the Company? \_\_\_\_\_

How many employees were laid off? \_\_\_\_\_ Date you were laid off \_\_\_\_\_

Did the Company give you any paperwork at the time of your layoff? Yes / No

*If yes, please attach a copy of all such paperwork.*

What was your annual salary or hourly rate of pay: \_\_\_\_\_

Did you receive your last paycheck? Yes / No

If no, how much are you owed? \_\_\_\_\_

Were you paid for all unused vacation? Yes / No

If no, how much are you owed? \_\_\_\_\_

What other benefits did the Company pay for and what was the approximate monthly cost?

Health Care? \_\_\_\_\_ Other? \_\_\_\_\_

Did the company have a written severance policy? Yes / No

*If yes, and you have a copy, please send it to us.*

Anything else you think we should know? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please complete and submit to [info@warnactlawyers.com](mailto:info@warnactlawyers.com).