

## Case Update Form\*

Grant Number:		<u>Date</u> :	
Case Name:			
Notable Opponents:			
Name of Judge(s):			
Current Court:	rage:		
Client contact information: Name:		Phone:	
ddress:		Email:	
(This information will remain confidential, but it may prove useful for gather	ering background information	in the event ADF chooses to pub	olicize our involvement with this case.)
Has a <i>demand letter</i> been sent on behalf of	f vour client?	□ No	□ Yes
If yes, please confirm that a copy is:			☐ Previously Sent
			•
Elect	ronic copy is:	☐ Unavailable	☐ Being Sent
Has a <i>complaint</i> been filed in this case?	□ No	□ Yes	
If Yes, please confirm that a copy is:	□ Attache	ed 🗆 Previously	Sent
Electronic copy is:		ilable ☐ Being Se	
If No, please provide the date of anticipate (If the complaint has not been filed, please notify ADF when it publicizing of your efforts.)		week prior to filing so that	ADF can effectively assist in the
Please review the status of the pending ac	tion:		
Please identify all motions currently pend	ling before the co	ourt:	
Please identify all known hearing dates an	nd motions or iss	ues to be determin	ned at such hearing:
Please identify the next anticipated action	:		
Has an attorney involved in the case atte  □ No □ Yes If yes, please i	nded an ADF Le ndicate name(s):	•	is employed by ADF?

<sup>\*</sup> This form must be completed and submitted with all invoices for payment request. Failure to submit this form shall result in a denial or a delay in the disbursement of funds.