

Case Update Form*

Grant Number: Date:			
Case Name:			
Notable Opponents:			
Name of Judge(s):			
Current Court:	Current Stage:		
Client contact information: Name:		Phone:	
Address:		 Email:	
(this information will remain confidential, but it may prove useful for gathering bac	ckground information		· ————————————————————————————————————
Has a <i>demand letter</i> been sent on behalf of you	ır client?	□ No	□ Yes
•		☐ Attached	☐ Previously Sent
Electronic copy is:		☐ Unavailable	•
Electi oni	c copy is.	□ Onavanaoic	□ Deing Sent
Has a <i>complaint</i> been filed in this case?	□ No	□ Yes	
If Yes, please confirm that a copy is:	☐ Attach	ed □ Previously	Sent
Electronic copy is:		ilable ☐ Being Se	
If No, please provide the date of anticipated fi (If the complaint has not been filed, please notify ADF when it will be publicizing of your efforts)		week prior to filing so that	ADF can effectively assist in the
Please review the status of the pending action:	:		
Please identify all motions currently pending	before the co	ourt:	
Please identify all known hearing dates and m	notions or iss	sues to be determin	ned at such hearing:
Please identify the next anticipated action:			
Has an attorney involved in the case attended □ No □ Yes If yes, please indic		•	is employed by ADF?

^{*} This form must be completed and submitted with all invoices payment request. Failure to submit this form shall result in a denial or a delay in the disbursement of funds.