Dr. James J. Carroll, CPA

1374 Roger Avenue Bridgewater, New Jersey 08807-1251 (908) 658-4998 Cell (908) 581-7727 Email: <u>drjamesjcarrollcpa@gmail.com</u> Member AICPA, NJSCPA, IMA, ACFE, NAFE

EARNINGS AND SERVICE LOSS QUESTIONNAIRE

It is difficult to consider all cases in the same manner. Here is a typical list of information needed to start a report. Other information may be requested later. Please type into the boxes below and return this WORD file. If hand-written, please scan and return via email. This information will be reviewed for accuracy and completeness before a report is prepared.

Case and attorney

	Provide answers here
Date this form is completed	
Caption for case	
Docket Number	
Attorney name	
Law firm name	
Firm address – PO Box and Street	
City State and Zip	
Phone	
Email address	
Name of person providing answers	
here	

Documents provided as attachments

	Provide brief descriptions of the attachments
Most recent amended	
compliant	
Incident/accident reports	
Reports of other experts	
Relevant passages of	
depositions and	
interrogatories	
Other documents as	
described herein	
Income tax returns – see	
details below	

The incident that is the basis for the case

	Provide answers here
Date	
Description – please provide any	
significant details that may extend	
beyond the description in the	
complaint	
Date of incident/death (if applicable)	
Expert opinions to establish	
 The alleged violation of the 	
standard of action/practice	
2) The causal connection	
between the incident and the	
result	
3) The duration such as	
permanent	

The person injured, deceased, or wrongfully terminated, etc.

If deceased, please provide the name of an appropriate family member. If we proceed with the engagement, please advise this person that I will be contacting them to establish a time for an interview.

	Provide answers here
Name	
Street address	
City, state, and zip	
Telephone	
Email address	
Income tax returns – see details below	

Family members (if appropriate)

	Provide answers here		
Family relationship	Name	Date of birth	Residence location
Spouse			
Description of family setting (who lives with whom)			

Occupation and Employer(s)

Please provide a resume if available

	Dates	Job title	Brief description
Pre-incident			
Post-incident			
(f applicable)			

Earnings

Please provide Federal income tax returns for the three full years before the incident and all years since. If a joint return, provide the details of earnings for each spouse by providing copies of W-2 forms. If Federal Income tax forms are not available, consider requesting them using the IRS form 4506. If still not available, explain below.

As an alternative to this, consider having your client access the "My Social Security" website at <u>https://www.ssa.gov/myaccount/</u> to obtain their earnings record.

		Sources	
Year	Total Amount (\$)	Box 3 of Form W-2	Form 1099
2017			
2016			
2015			
2014			
2013			
2012			
2011			
2010			
2009			

Fringe benefits

Provide benefits booklet or other

Benefit name	Brief benefit description

Service type	Pre-incident	Post-incident	Commentary		
	Household				
	Advice an	d Counsel	Γ		
	Companionship				

Services for family members (if applicable)

Documents – a generic list – customize as appropriate

Please provide **electronic** copies of at least these documents (if appropriate):

- 1) The complaint (most recent copy) and case information statement
- 2) Tax returns of the injured/deceased party for the last three years before the incident year and years all since. For example, if the incident occurred in 2019, provide the tax returns for 2016-2018 and 2019 and forward.
- 3) For cases involving lost earnings, employer documents describing extraordinary employee benefits.
- 4) Within the tax returns allow providing the W-2 forms to allow the split of income between parties on a joint return. To check for completeness check, both the tax returns and the W-2s are needed.
- 5) Interrogatories
- 6) Deposition transcripts but usually, I have little concern about proofs of liability. Usually, accident re-construction items and opinions of medical malpractice are not part of my work.
- 7) Medical/vocational opinions usually, I will only rely only on the opinion portion of the report and not attempt to read medical records.
- 8) Other short documents such as police incident reports and death certificates.