

NAZEK A. GAPPY P.C.
CATF/NITF
USA/CANADA IRAQ COMPENSATION PROJECT
NIC-F CLASS ACTION INTAKE

Date _____

Client Name _____

Date of Birth _____ Age _____

Address _____

Phone Number(s) _____

Marital Status _____ Kids _____

Driver License No. & State _____

Social Security Numbe _____

Address in Iraq _____

Proof of Iraqi Origin _____

Property Lost/Destroyed?

Physical/Emotional Injuries?

Family Members Deceased or Missing: Name/Address in Iraq, DOB/Occupation/Education:

