

PHILADELPHIA VIP INITIAL STATUS REPORT

November 29, 2007

Dear:

We would be grateful if you would answer these questions regarding the following referral:

Client:

Date Referred:

1. I have undertaken representation of the client. Yes _____ No _____

If not, why not?

2. Brief summary of action taken to date:

(Use additional space if needed)

3. If court action has been required since your last report:

Caption:

Court Term & Number:

4. Brief summary of further intended action on this matter:

5. Approximate number of hours spent on case: _____

6. Do you want VIP to submit your name to Probono.net? See enclosed brochure. ___Yes ___No

Volunteer's Name & Address

Date

Thank you for your generous and continued support. If you have changed firms, address or telephone number, please let us know.

Mail or Fax to: Managing Attorney, Philadelphia VIP, 42 South 15th Street, 4th Floor, Philadelphia, PA 19102, Telephone: 215-523-9550, Fax: 215-564-0845.