

Investigation Intake Request Form

Date:
Client Company Name:
Client Primary Contact & E-mail:
Client Reference # (or IP Owner Represented):
Additional Persons to Copy on E-mail:
<p>What category below best classifies the primary focus of this Investigation?</p> <p><input type="checkbox"/> Trademark Use <input type="checkbox"/> Evidentiary Purchase <input type="checkbox"/> Counterfeiting <input type="checkbox"/> Infringement</p> <p><input type="checkbox"/> IP Acquisition <input type="checkbox"/> Background <input type="checkbox"/> Locate/Identify <input type="checkbox"/> Other: _____</p>
Subject Entity/Individual for Investigation:
Client Objective(s):
Case Background and/or History with Subject:
Initial Research Conducted:
May we contact subject (as appropriate) in course of investigation? <input type="checkbox"/> Yes <input type="checkbox"/> No
Upcoming Deadline(s) or Need Answers by Date:
Additional Notes:

Please e-mail form to tdt@vaudra.com. We will confirm receipt & address any questions before proceeding.
Thank you for the opportunity to assist with your IP PI needs.