

Chlorpyrifos

CRITERIA:

Diagnosis of Autism, Epilepsy, Seizures, ADHA, other neurological or developmental disorders

Chlorpyrifos is an organophosphate insecticide, acaricide and miticide used primarily to control foliage and soil-borne insect pests.

The chlorpyrifos lawsuits claim that children exposed to chlorpyrifos in the womb or at a very young age have suffered severe neurological injuries because of the chemical.

<https://www.levinlaw.com/chlorpyrifos-lawsuits>

Injured name: _____ DOB: _____

Single, Widow, Divorced, Married (if married, spouse name): _____

Caller Name (if different): _____

Caller's relationship to injured person: _____

Why are you calling rather than the injured person? _____

Mailing Address (street/PO Box, city, state, zip): _____

Physical Address, if different: (street, city, state): _____

Cell phone: _____ May we text you? If yes, who is your provider: _____

Home phone: _____ Work phone: _____

Email Address: _____ Preferred method of contact: _____

(If Injured Person Is Deceased) Date of Death: _____

Cause(s) of Death: _____

Residency at time of Death (city & state): _____

Has an Estate been opened: _____ Appointed Personal Representative: _____

_____  _____

Do you have any children who have suffered from and/or been diagnosed with any of the following:

Autism _____ Seizures _____

Epilepsy _____ ADHD _____

Any other type of neurological and/or development disorder _____

If none, decline

If yes to any of the above, please provide the following for each child:

Child's name: _____

DOB: _____

When diagnosed (month/year)? _____

If not diagnosed, when was the child seen for symptoms? _____

Location of physician (city/state)? _____

Child's name: _____

DOB: _____

When diagnosed (month/year)? _____

If not diagnosed, when was the child seen for symptoms? _____

Location of physician (city/state)? _____

Have you ever directly applied, mixed, or otherwise handled a pesticide containing Chlorpyrifos? _____

Common names: Lorsban _____ Dursban _____ Chlorpyrifos 4E AG _____

Did you work or live near a location where a pesticide containing Chlorpyrifos was used? _____

- If yes, what was the approximate distance from the location where Chlorpyrifos was being used to where you were located? _____

Over what time period were you exposed to chlorpyrifos? _____

******* Please be sure to save all evidence *******

Including any proof of purchase, receipts, packaging, boxes, etc.