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## QUESTIONNAIRE

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

IBM Employee Serial Number (If Known): \_\_\_\_\_

Last Date of Employment at IBM: \_\_\_\_\_

Date Learned of Termination: \_\_\_\_\_

Were other employees terminated at the same time? Y N

Did you sign a Separation Agreement? Y N

Have you filed a complaint of discrimination with the Equal Employment Opportunity Commission (EEOC)? Y N

If so, what date was it filed? \_\_\_\_\_ Is it still pending? Y N

Are you interested in joining a collective action against IBM? Y N