

# ***HOUSEHOLD SERVICES QUESTIONNAIRE WRONGFUL DEATH***

Attorney: \_\_\_\_\_

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

Date Of Incident: \_\_\_\_\_

Indicate number of hours decedent spent engaged in the following activities.  
Please answer as accurately and completely as possible.

	<i>Hours</i>	<i>Time Period</i>
<b>Inside Housework</b>		
Laundry (Includes sorting, pre-treating, folding, and putting away.)	_____	Per week
Ironing	_____	Per week
Dusting	_____	Per week
Vacuuming	_____	Per week
Mopping floors	_____	Per week
Making beds/changing linens	_____	Per week
Kitchen cleaning	_____	Per week
Bathroom cleaning	_____	Per week
Taking out trash	_____	Per week
<b>Food, Cooking and Clean-up</b>		
Meal planning	_____	Per week
Food preparation	_____	Per week
Setting the table	_____	Per week
Dishwashing (by hand or machine)	_____	Per week
Preserving foodstuffs	_____	Per week
Putting away clean dishes	_____	Per week
<b>Pets, Home &amp; Vehicles</b>		
Feeding pets	_____	Per week
Walking, playing, training with pets	_____	Per week
Grooming and veterinarian visits	_____	Per week
Seasonal cleaning and decorating	_____	Per week
Cleaning walls and cabinets	_____	Per week
Washing windows	_____	Per week
Repair	_____	Per week
Remodeling	_____	Per week
Painting	_____	Per week
Plumbing and electrical	_____	Per week
Roof and gutter maintenance	_____	Per week

**Pets, Home & Vehicles (Cont'd)**

Lawn care	_____	Per week
Gardening	_____	Per week
Raking leaves	_____	Per week
Snow removal	_____	Per week
Automotive maintenance	_____	Per week
Automotive cleaning	_____	Per week

**Household Management**

Billpaying	_____	Per week
Budgeting	_____	Per week
Compiling information for tax returns	_____	Per week
Preparing tax returns (if self-prepared)	_____	Per week
Banking	_____	Per week
Investment activity	_____	Per week

**Shopping**

Food and household goods (only time spent in store)	_____	Per week
Preparation and research (Includes reviewing advertisements, composing a list, coupon clipping and organization, and obtaining rebates.)	_____	Per week
Putting away purchases	_____	Per week
Clothing and shoes	_____	Per week

**Obtaining Services**

Meeting with accountant or financial planner	_____	Per week
Accompanying household member to doctor or dentist. (Not including commuting time)	_____	Per week
Researching repairmen or contractors	_____	Per week
Dealing with repairman or contractors	_____	Per week

**Travel for Household Activity**

Commuting to grocery or wholesale store	_____	Per week
Commuting to dry cleaner	_____	Per week
Commuting to doctors and dentists	_____	Per week
Commuting to bank	_____	Per week
Other household errand commuting	_____	Per week

This is to certify that, to the best of my knowledge, the above information is complete and accurate:

\_\_\_\_\_  
Signature of Preparer

\_\_\_\_\_  
Print Name of Preparer

\_\_\_\_\_  
Date