UNIFORM JUDICIAL QUESTIONNAIRE

CONFIDENTIAL

1	I. Full Name:				
	Have you ever been known by if so, specify the name(s) and y	any other name (other the day) of name change a	nan a recognizable nicki and/or the years during t	name)? Yes which the other name or i	No
			•		
2	Date and place of birth:				
3	. Current residence address:		4. Current	home telephone:	
	Number of years at current addr	ress: If les	s than one year in reviou	us address(es) during pas	t veer
			and you, provide	os accioss(es) during pas	t year.
5.	Do you rent, other than for a s If so, please list address(es):	eason, or own any add	tional homes?	Yes No	
6.	Current business address:		7. Current	business telephone:	
8.	Marital Status: sing	gle married	divorced		
9.	Identify the Court or public offic Court District for which you are	ce and, where applicable and state	le, Judicial Departmen whether you are a can	it, Judicial District, Cou ididate for election or fo	nty, or
			,		r appointment:
10.	(For elective offices) Political panomination:	arty or parties which are	supporting your can	didacy, or of which you	are seeking
	Did you serve in the armed force (a) Dates of service:	(b) Branch of serv		offowing Information: Nature of discharge:	

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Name:				

12. List in reverse chronological order all employment and periods of unemployment since graduation from law school. (If law school attendance did not commence within a few months following completion of undergraduate course study, list also all employment and periods of unemployment between college and law school.) Continue on additional page, if necessary.

	1			, Nature of	
Name of Firm or Employer	Address	Name of Supervisor	Dates of Employment (Month 8 Year)	Employments (or activity while unemployed)	Reason for Leaving
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- 13. (a) Have you ever held public or political office, elected or appointed, other than ones listed in answer to Question 12 above? ______ Yes _____ No. If so, please state position held, dates of service and whether the office was attained by election or appointment:
 - (b) Do you or any members of your family hold any memberships (other than voter registration) in political organizations or engage actively in any political activities? ______ No ___ H so, please describe:
 - (c) Are you related by blood or marriage to anyone involved in the appointing or nominating process with respect to the position you are seeking? _____ Yes _____ No __ if so, please give name, position and relation:
 - (d) Are you related by blood or marriage to any attorney or judge, or to any other person whose employment, position, affiliation or activity may reasonably create, with respect to your carrying out the duties of the office you are seeking, the appearance of a conflict of interest? ______ Yes _____ No If so, please supply name, relation and employment, position, affiliation or activity:

Number of Hours

וטז	i-time, other than t	ingaged, on your own i hose listed in your ans	wer to question 12	? Yes	_ No	
	pe of Business orolession	Name of Employer	Address	Position held	Dates involved	Reason for termination of business
		. ••				
		1				
					i	
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					!	
				•		
						·
5. (2)	public or a driver	en Issued a license, of 's license? Yes nd its last renewal:	ther than a marriage No If so,	e license, license to please describe the	practice law, li license, and li	st the dates of its
	initial issuance a	no its last tenewal:	•			
(b)	Has such license	, or a driver's license, cribe the circumstance	ever been revoked (s:	or suspended?	Yes	No
	11 30, p.c. 33					
		onal schools (other tha	n law schools) atte	nded:	Dates	
Sc	hool	Location	Degree	<u>Honors</u>	Attended	Date of Graduation
				•		
						$\frac{d^2}{dt} = \frac{d^2}{dt} = d$
	w Schools attended	d:			Dates	
'. La			Degree	Honors	Attended	Date of Graduation
	hool	Location	MONTHE	3.4		

Sponsor

18. Post-Law School Continuing Legal Education:

<u>Description of Course</u>

	State all courts in which y New York (Give Judicial De		itted to pred	aice, tog	ether with	02103 01	Dates	of Admi	ission:		
b)	All other federal and state of	courts:									
	(i) :										
	(F):										
	(M) :										
	(M):										
	(**)										
Ю.	State all areas of law in w	hich you hav	ve concentr	ated:							
1	Have you ever resigned fr	rom a nostilo	n as. or. fo	r other re	asons, cea	sed to t	>0:				
١.	(a) a member of the							Yes	No		
	(b) a member of a go										
	similar position?				•			•	-		
	If so, please describe:								:		
	•										
						•		•			
		100									
	Are you now, or have you	ever been, t	he subject	of any for	mal comp	laint, ch	arge or (laim of	maipractic	e arising (o fuc
4.	your official or profession (a) law practice?			ig the col	orse or you						
۷.				No							
2.			103								
4	(b) public or judicial s (c) campaign for publ				Yes	_ No					
	(b) public or judicial s	lic or politica h complaint, complaint,	charge or c	elalm and laim was	its outcon	ne, Inclu sured yo	u, Issue	d a cauti	ion, Impos	ed a sanci	llon
	(b) public or judicial s (c) campaign for publ If so, please describe each other entity to which such	lic or politica h complaint, complaint,	charge or c	elalm and laim was	its outcon	ne, Inclu sured yo	u, Issue	d a cauti	ion, Impos	ed a sanci	llon
	(b) public or judicial s (c) campaign for publ If so, please describe each other entity to which such	lic or politica h complaint, complaint,	charge or c	elalm and laim was	its outcon	ne, Inclu sured yo	u, Issue	d a cauti	ion, Impos	ed a sanci	llon
	(b) public or judicial s (c) campaign for publ If so, please describe each other entity to which such	lic or politica h complaint, complaint,	charge or c	elalm and laim was	its outcon	ne, Inclu sured yo	u, Issue	d a cauti	ion, Impos	ed a sanci	llon

30. Have you timely filed all required Federal, State and City Income tax returns appropriate to your place of residence?

Yes _____ No If not, please describe:

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31.	Have you ever been treated for, or had a consumption of alcoholic beverages or Other than with routine, short-term payo	any other :hiatric co	form of dri unselling, l	ua addiction	or denende	nev?	Yes	Ma
	mental lilness, condition or disorder?	Yes	No	•		·		
	If so, please describe each treatment, pr condition and disorder, including the na	oblem, rel ture and r	lated cond esult of an	ition, drug ed ly related pro-	diction, dru ceeding bro	g depende ught again	ncy, menta st you:	i iliness,
	Da van bara anu lilaasa saadiilaa ay di							
2.	Do you have any illness, condition or dis or the time you could devote to fulfilling If so, please describe:	the obliga	intal or phy itlons of, th	ysical, which he position yo	could in any ou are seeki	ng?	Yes	ormance in <i>No</i>
ž.								
) .	Are you a member of any bar association following information for each such asso				Yes _	No	If so, plea	se give the
	Name of Association		Dares of	Membership		Comm	ittee Servic	•
						4		
					4.			
	Describe any significant community activ	ities In wh	nich you ha	ave engaged:			4	
			•	3 3				
							*	
•	Java van willen adialas for aublication?	Va			. 44			
1	lave you written articles for publication? he title of each article:		's	vo il so, givi	tne name i	ing gate of	the public	ation and
	garanta da Santa da							
_								
ł	lave you had any teaching experience in	aler 10 wai	ited fields1	7 Yes	No	H so, plea	se describe) ;

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Now

38. (a)	Do you subscribe, and have you adhered, to the car York State Bar Association (Published in the New Y Ethics Opinion No. 289, dated April 27, 1973)?	mpelgn guld 'ork State Be Yes	ielines establish ar Association J No	ned for judicial c lou <i>mal</i> —Comm	andidates by	y the New lessional
	If you answered this question in the negative, please	e explain:				
(b)	If you are seeking elective office, have you, or has a concerning the election in which you are a candidate	nyone on yo	our behalf, lasue	d any campaign I so, please atta	literature ch copies.	
	ATTACH THE FOLLOWING SCHE	DULES TO	THIS QUESTI	ONNAIRE.		

AS TO EACH SCHEDULE, SPECIFY THE QUESTION NUMBER TO WHICH IT APPLIES.

Name:

39. For Attorneys: Attach a statement specifying:

- (a) the types (i.e., civil or criminal, state or federal) and number of cases you have tried in the past ten years;
- (b) the number of the cases in category (a) of this question which ended in a verdict or judgment by the trier of fact;
- (c) the number of cases listed in category (a) of this question which were tried before a jury;
- (d) the courts in which the cases were tried;
- (e) the number and types of appeals briefed in the past ten years;
- (f) the number of appeals argued and the courts in which the arguments were heard; and
- (g) the title and citation of reported cases tried and appeals argued.
- 40. For Attorneys: Submit a list of the last ten trials or appeals in which you have actively and substantially participated in any state or federal court at the trial or appellate level, including the title of the case, the index, docket or indictment number, the court in which the case was heard, a concise description of the nature of the case, the date of the trial or oral argument, the name, address and telephone number of each adversary and co-counsel, and the name(s) of the judge(s) who presided at trial or sation the appellate panel. For each appellate matter, please submit one copy of your brief.
- 41. For Attorneys: Submit a list of the name, court and telephone number of the last ten judges, other than the judges listed in your answer to question 40, before whom you appeared in the last three years (other than for routine calendar appearances).
- 42. For Attorneys: If you have not had significant litigation experience, please attach a statement giving a concise description of your practice. Append to that statement a general description of the fast ten matters you handled and the names, addresses and telephone numbers of the lawyers, other than your associates, employees, partners, co-tenants, supervisors or employers, with whom you worked on each of those ten matters.
- 43. For Judges: Submit a list of your ten most recent opinions with the citation to each or a copy thereof if not published.
- 44. For Judges: Submit a list of the last ten trials or appeals over which you have presided, including the title and dates of each case, a brief description of the nature of each case, and the names, addresses and telephone numbers of the attorneys involved.
- 45. For Judges: Submit a list of the governmental agencies, private agencies, private lawyers and private law firms which have appeared before you in the last year on a regular basis, specifying the name and phone number of the supervising attorneys for
- 45. For all candidates: Submit a list of the names, addresses and telephone numbers of any judges, public officials or attorneys whom you suggest the Committee contact with respect to your candidacy.
- 47. For all candidates: Please specify any additional information which it is reasonable to expect the Committee would want to know when it considers your qualifications for the office you seek.

Name:

I ACKNOWLEDGE BY MY SIGNATURE THAT THE ANSWERS I HAVE GIVEN ARE TRUE AND COM-PLETE AND RECOGNIZE MY CONTINUING OBLIGATION DURING THE EVALUATION PROCESS TO CORRECT AND SUPPLEMENT MY ANSWERS IN ORDER TO ENSURE THAT THEY REMAIN TRUE AND COMPLETE.

Date

Signature