Attorney/Client and Work-Product Privileged and Confidential Return completed forms to:

ACLU of Arizona, intake@acluaz.org or P.O. Box 17148, Phoenix AZ 85011-0148

Trump Protest August 22, 2017 Participant Questionnaire

Name	e:	Age:	Primary Language:
Email:		Best Phone Number:	
Addre	ess:		
Quest If your	tions r answer requires an explanat	tion, please use the back of t	this sheet to expand
1.	Were you protesting or demonstrating on August 22, 2017, near the Phoenix Convention Center where President Trump gave a speech at a political rally?		
2.	<u> </u>		gust 22, 2017 near the Phoenix Convention ix Police began dispersing the crowd?
3.	Did you inhale or other	wise suffer the effects o	of the gas and/or smoke dispersed by police?
4.	Were you hit and/or injuyou?	ured by any projectile ι	used by police to disperse crowd? What hit
5.	Did you engage in any o	conduct that caused the	e Phoenix Police Department to use force
6.	Did you seek medical at	ttention for any of the a	above causes?
7.	Do you have any docum	nentation of your presen	nce at the protest (photos, videos, etc.)?
8.	Anything else about the	e events of August 22, 2	2017 that you would like to share?