

INTAKE SHEET - CRIMINAL/TRAFFIC OFFENSES:

FOR OFFICE USE ONLY:

Juv. Court: _____
Gen. Dist: _____
Cir. Court: _____
County: _____
Ret: _____

Consult Date _____ Incarcerated: yes / no Bond _____

Name _____

Address _____

_____ School: _____

Phone Number: Day _____ Evening _____ Message: _____

SSN: _____ D.O.B. _____ Marital Status: _____

Employed by: _____

Address _____

Income: Pay period _____ Net: _____ Other: _____

Spouse/S.O./Parent: _____ Adverse? Y / N

Address (if different): _____

Employed by: _____

Address _____

Charges: Felony _____ Misdemeanor _____ Probation Violation _____ Other (specify) _____

Brief Description of Problem:

Victim(s) _____

COURT DATE: _____ Bond Hearing: _____

Potential Witness(es): _____

Notes: _____

Acknowledgement: I understand that this consultation is for advise only and that a retainer agreement will be required prior to this firm providing services or opinions beyond this consultation. I agree to pay the charges for this consultation at the conclusion of today's visit. I understand that should collection proceedings become necessary for this firm to collect these charges, I shall be responsible for the cost the proceedings, including, but not limited to reasonable attorney's fees.

Signature _____

Date _____