

NEW CLIENT INFORMATION SHEET

Please complete fully

TODAY'S DATE: _____	
Client's Full Name _____	DOB: _____
Spouse Name: _____	Spouse DOB: _____
Street Address _____	
Mailing Address (if different) _____	
City/State _____	Zip _____
Telephone (Home) _____	Telephone (Cell) _____
Email _____	
Preferred Contact Method: <input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> Regular Mail <input type="checkbox"/> Fax	
Client's Employer _____	Spouse's Employer _____
Emergency Contacts:	
Name _____	Relationship _____ Telephone _____
Name _____	Relationship _____ Telephone _____
How Did You Hear About Us? _____	
Conference With Attorney Regarding: _____	

Adverse Party/Conflict Name: _____	

**We highly recommend that you do not use work email for confidential legal correspondence*

Initial Consultation Fee & Terms

The minimum fee is **\$50** for up to one half hour. Beyond the initial consultation, the fee will be an additional \$250(SMN) / \$290(EFP) / \$225(AEF) per hour for the time over the initial half hour, depending on the attorney working on your case. ***Payment by cash, check, card (Visa, Mastercard or AMEX) is due at the end of today's interview.*** All unpaid invoices accrue interest at the rate of 9% per annum from the due date.

*Other than this initial consultation, we may accept no case, and do no work for you of any kind, without a separate written agreement signed by you and the lawyer which describes the work to be done and the fees and costs associated with the case. This worksheet is **not** such an agreement.*

I have read this agreement and agree to the terms and conditions as stated. There are no verbal agreements modifying or expanding the terms of this agreement.

[Client]

[Date]