

CLIENT INFORMATION FORM

INSTRUCTIONS: Answer all questions truthfully and completely. The information you enter in this questionnaire is confidential and protected by Attorney-Client Privilege. The information will not be disclosed to anyone outside of this office, except in the course of rendering legal services on your behalf, or unless otherwise required by law. An information to Potential Client sheet is attached hereto that will require your signature at the consultation appointment. *Thank you.*

CLIENT INFORMATION:

Date: _____

Your name: _____

Home address: _____

City: _____ State: _____ Zip: _____

Home telephone: _____ Cell. phone: _____

E-mail address (it should be a secure address) _____

Social Security Number: _____

Driver's License State: _____ Driver's License Number: _____

Date of Birth: _____ State/Country of birth: _____

Date of marriage: _____ State & county of marriage: _____

Date of separation: _____

Emergency contact for you: _____

Home telephone: _____ Work telephone: _____

Address: _____

Their relationship to you: _____

Year, Make & Model of vehicle in your possession: _____

If this is a Divorce do you want a name change? If so to what: _____

How did you hear about our office? _____

IF ANY OF THE ABOVE INFORMATION CHANGES DURING THE COURSE OF YOUR ATTORNEY CLIENT RELATIONSHIP, YOU HAVE A DUTY TO PROVIDE THAT INFORMATION AS SOON AS IT IS KNOWN TO YOU

CHILDREN:

1. Name: _____ Sex: M F

Date of birth: _____ County of birth: _____

Relationship to you: my child stepchild adopted child Other: _____

SSN: _____

2. Name: _____ Sex: M F

Date of birth: _____ County of birth: _____

Relationship to you: my child stepchild adopted child Other: _____

SSN: _____

3. Name: _____ Sex: M F

Date of birth: _____ County of birth: _____

Relationship to you: my child stepchild adopted child Other: _____

SSN: _____

4. Name: _____ Sex: M F
Date of birth: _____ County of birth: _____
Relationship to you: my child stepchild adopted child Other: _____
SSN: _____

YOUR EMPLOYER:

Name of employer: _____
Work address: _____
City: _____ State: _____ Zip: _____
Work phone: _____ Work FAX: _____
Work e-mail address: _____
Position: _____ Salary/wage: \$ _____ per _____
How long have you worked for this employer? _____ years _____ months

YOUR SITUATION:

Nature of case / reason for seeking consultation with our office (example: divorce, custody, visitation, modification of plan or order, etc.):

OTHER PARTY INFORMATION:

Name: _____
Other names this person has been known by: _____
Home address: _____
City: _____ State: _____ Zip: _____
Home telephone: _____
Cell phone: _____
E-mail address: _____
Social Security Number: _____
Driver's License State: _____ Driver's License Number: _____
Date of Birth: _____ State/Country of birth: _____
Vehicle in their possession _____

Their Employer:

Name of employer: _____
Work address: _____
City: _____ State: _____ Zip: _____
Work phone: _____ Work FAX: _____
Work e-mail address: _____
Position: _____ Salary/wage: \$ _____ per _____
How long have they worked for this employer? _____ years _____ months

Other attorney:

Is the other party represented by an ATTORNEY in this matter: Yes No

If **YES**, please answer the questions below:

Name of attorney or firm: _____

City where office is located: _____ Telephone: _____

Has that attorney, or any other attorney:

Represented the **other party** in other matters (besides this case)? Yes No

Provided advice or other services to **you** regarding **this** case? Yes No

Provided advice or other services to **you** regarding **other matters**? Yes No

Talked with you in person or by telephone regarding **this** case? Yes No

Consultation

Even though I have met with you for a consultation, I do not represent you until you have retained me. I am retained when you sign the Attorney Client Agreement and pay the initial retainer.

Electronic Information Including Social Media

If you are in possession of any information that you have obtained from a social media account for another person that you intend to use in your case, including Facebook, Instagram, Twitter, Pinterest, or any other social media site, you are prohibited from destroying this information. If you have posted on any of these sites, you are prohibited from deleting this information. I believe that the current law prohibits you from accessing the electronic information of any other person, including your spouse, without their consent. This prohibition includes access to information on their cellular phone (even if you have their passcode or fingerprint access), their email account (s), and the social media sites. You are also prohibited from creating an account in another name or alias so as to access this information.

I believe that if you access this information or destroy the information referred to in the above paragraph, you could face both civil and criminal penalties. Please be very cautious.

If you obtain information although you are prohibited from doing so, I cannot see this information. My staff cannot see this information. You are prohibited from sending this information to anyone else. Giving protected information to anyone is a violation of the privacy rights of the person whose information you obtained.

Date:

Signature:
