



# Betner-Gray Law Client Intake Sheet



Potential New Client:

Prior Client:

Initial Office Consult:	Date: _____	Time: _____
Appointment Confirmed:	Date: _____	Initials: _____

<b>Client Email Address:</b>	<b>Area of Law:</b>
<b>Date Called/Walked in:</b>	<b>Time:</b>

### Client Information:

<b>Name:</b>	
<b>Address:</b>	
<b>Home Tel #</b>	<b>Work/Cell#</b>
Marital Status:      Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/>	

### Spouse Information (if applicable)

Name:	
Address:	
Home Tel	Work Tel#:

<b>Case Name/ Number:</b>	<b>Judge/Court:</b>
Referred By:      Client <input type="checkbox"/> Attorney <input type="checkbox"/> Other <input type="checkbox"/>	

### Note(s):

---



---



---

### **FOR OFFICE USE ONLY**

#### *Initial and Date The Following Items When Completed:*

Conflict Check:	Fee Agreement:
Legal Services Agreement:	Docket Entered:
Statute of Limitations/Time Deadline:	<b>Date Initial Invoice Sent:</b>