

Potential Client Information Sheet

PRIVACY NOTICE: Communications with attorneys are covered by the attorney-client privilege. The information on this sheet is requested to help us determine whether we can assist you, and to open a file.

Completing this form does not mean we agree to represent you. We will not disclose the information you provide to us, even if you do not hire us, to anyone else except under order of court or except as required in order to provide legal services to you or to transact our business, which may include the investigation of creditworthiness or the collection of payments due.

Identification

Name Last: _____
Driver's Lic.: _____
Date of Birth (m/d/yyyy) _____

First, M.I.: _____
SSN: _____

Contact Information

Address (h): _____
Phone (H): () _____
Fax () _____
Pager () _____
E-Mail _____@_____

Employer: _____
Work: () _____ EXT.: _____
Cell/mobile: () _____
Other: () _____
E-mail (alt): _____@_____

May we contact you at work? Phone: Yes No OK to E-mail? Yes No

Referral

Are you a previous client? Yes No

How did you hear of us? (Check all that apply)

Attorney: _____
 Family or friend _____
 Internet Search: (site) _____
 In neighborhood/building _____

Other client _____
 Bar association Yellow Pages
 General community reputation
 Other: _____

Conflict of Interest Check:

All other parties involved: _____

Nature of Legal Matter(s) (check all you may think apply)

Business advice

Startup or general advice Contract Review Employer-Employee

Intellectual Property

Copyright Trademark Trade Secrets Licensing Computer/Internet
 Other: _____

Real estate / land use

Buying Selling Building Land use Lease or rental issue

Wills & Estates

Will or Trust Living Will Power of Attorney
 Other Estate Planning Estate Administration (relative's or friend's death)

Family Law

Adoption Guardianship Abuse Pre-Nuptial
 Separation Dissolution of Marriage Post-Dissolution Issues

Litigation or Dispute (other than above)

Contract Property Debt Collection Personal Injury
 Civil Rights Employment Defamation Other: _____

Other: _____

Payment

The Law Offices of Jeff Smith provides legal services on an hourly basis. Other arrangements may be made in appropriate cases. A retainer will be requested in most cases. How do you plan to pay?

Cash Check Credit card (paypal only): _____

I represent that the above information is true and correct and I acknowledge that Jeffrey P. Smith will rely on this information in evaluating my legal matter and deciding whether to represent me.

Signed: _____ Date: _____