

Law Office of Tracey D. Johnson, LLC

General Client Intake Form

The purpose of an initial consultation is for the Law Office of Tracey D. Johnson, LLC to advise you, the *prospective* client, what if anything, may be done for you, and what the minimum fee therefore will be. *The purpose is not to render a definitive legal opinion* as it may be impossible to fully assess a matter within the time frame allotted for a consultation or with the (information or documents) that you may be able to provide at the initial consultation.

One of three outcomes is possible following your consultation.

- A. You and the Law Office of Tracey D. Johnson, LLC mutually agree to the terms of representation, or (After a separate document called an Agreement for Representation is signed a copy will be provided to you.)
- B. Law Office of Tracey D. Johnson, LLC declines representation, or
- C. You decide not to use the services of the Law Office of Tracey D. Johnson, LLC.

Note: The following questions will help us to understand the reason for your visit today. Your responses are protected by attorney/client privilege and will be held in strict confidence.

Name _____
Last, First Middle Maiden

Address _____
Number Street City State Zip

Home Phone (____) _____ **Work** (____) _____ **Mobile** (____) _____

Marital Status: Married Single Divorced Widowed Separated **Date of Birth** _____

Drivers License # _____ **Social Security #** _____ - _____ - _____

Are you known by any other names? Yes No **E-mail** _____

If yes name(s) _____ (A fictitious, a nickname, a former, or maiden name etc.)

Where are you employed? (Name of company/organization, name of supervisor, address with zip code)

_____ **May we contact you there?** Yes No

_____ **Supervisor** _____

If your mail is returned as undeliverable or telephone service terminated, please provide the name of someone (friend or relative) you believe will always know how to contact you.

Name _____ **Relationship** _____

Address _____ **Phone No.** (____) _____

_____ **E-mail** _____

1. Briefly explain what you may need advice about or assistance with today:

2. Are there any parties involved? (Examples: spouse, a friend, an employer, a neighbor, signor of a contract, etc. This should include parties on either side of your issue)

Party _____ Relationship _____ Phone # _____

Party _____ Relationship _____ Phone # _____

Party _____ Relationship _____ Phone # _____

3. On the lines below, list the documents (papers) that you think may help us to understand the issues.

- A. _____
- B. _____
- C. _____

(NOTE: Any documents you supply that are important to your matter will be photocopied, with your permission, and your originals returned to you at the conclusion of the initial interview.)

4. Ideally, if things turn out precisely the way you want, what would the outcome be?

5. Knowing that there are no guarantees, what can you accept as the outcome to your issue?

6. Please classify your urgency in concluding this matter? (check one)

- Critical – Personal safety or continuation of business depends on it.
- Very important – severe hardship, personal or financial inconvenience if matter is not resolved quickly.
- Important – Matter interferes with business or personal financial stability.
- Needs to be done, but no immediate hardship in the interim.
- Just thought I'd see if it was worth pursuing, but I'm not counting on anything.
- Just wanted to know what my rights are? I'll then let you know after I think about it.

7. If the matter involves payment of money you feel you are owed, how long can you wait before not getting paid? _____

(Days, Weeks, Months, Years)

8. Are we the first attorneys you have consulted regarding this matter? Yes No

If No – Why didn't you hire their services?

9. Have you ever been represented by an attorney before? Yes No

If Yes – Please state the circumstances of the representation or state the issue

10. How will you pay for your attorney's fees in this matter (contingency, not accepted)?

Check Cash Cash and Check Credit Card

11. How did you learn of our office? A friend Yellow Pages Bar Referral Former Client Other

If other, describe: _____

12. This law office charges a non-refundable \$50.00 initial consolation fee. Please initial here to denote that you agree to pay this fee. Client's Initials _____

PLEASE READ CAREFULLY & Sign Below

Following your initial interview, if you agree to hire the Law Office of Tracey D. Johnson, LLC, and the Law Office of Tracey D. Johnson, LLC agrees to represent you, you will both sign an Agreement for Representation. The Agreement for Representation will set forth the terms and conditions of representation.

If the Law Office of Tracey D. Johnson, LLC is willing to represent you and you decide not to sign an Agreement of Representation today, you are strongly urged to schedule a second appointment with the Law Office of Tracey D. Johnson, LLC at the earliest possible time or to immediately consult with other legal counsel to protect your rights.

NOTICE: This office does not represent you with regard to the matters set forth by you herein in this information sheet or discussed during your consultation unless and until, both you and the Law Office of Tracey D. Johnson, LLC execute a written Agreement for Representation and any initial fees are paid, as required by the Agreement for Representation are paid.

If the Law Office of Tracey D. Johnson, LLC does not agree to represent you, this includes not representing you with regard to the matter set forth by you on this information sheet, or any other matters you may discuss with the Law Office of Tracey D. Johnson, LLC during your consultation. If your legal problem(s) involve a potential lawsuit, it is important that you realize a lawsuit must be filed within a certain period of time called a Statute of Limitations. Therefore, the Law Office of Tracey D. Johnson, LLC strongly urges you to immediately consult with another attorney to protect your rights. The Law Office of Tracey D. Johnson, LLC's decision not to represent you should not be taken by you as an expression regarding the merits of your case.

Your signature acknowledges only that you received a copy of this completed information sheet and does not mean you have hired the Law Office of Tracey D. Johnson, LLC.

SIGNATURE _____ DATE ____/____/____

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**This portion to be completed by the Attorney**

- Will represent (see Case Notes and Agreement for Representation attached)
- Will investigate and report (Schedule a follow-up conference for \_\_\_\_ days)
- Representation declined – Letter of declination will be sent.
- Party "will think about it" and get back with us – No action to be taken and party was so informed.
- Client declined Representation at this time.

Interviewed by \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_