

Intake Questionnaire

CLIENT INFORMATION	
Name (first, middle, last):	
Address (street, city, state, zip):	
Home Phone Number:	
Work Phone Number:	
Cell Phone Number:	
E-mail Address:	
Driver's License Number:	
Social Security Number:	
Date and Place of Birth:	
Previous (Maiden) Name:	
Race:	

Children's Names (first, middle, last):	Date of Birth:

Employer:	
Address:	
Phone Number:	
Position:	
Rate of Pay:	
Length of Employment:	

Please provide the following information or attach a separate financial statement or spreadsheet.

ASSETS			
	Value	Owing	Net
Home			
Other Real Property			
Checking Account			
Savings Account			
Investments			
Retirement #1			
Retirement #2			
Vehicle #1			
Vehicle #2			
Other			
Other			

LIABILITIES		
Creditor	Balance Owing	Monthly Payment

Are you married or do you have a wedding date scheduled?	If yes, what is the date?

What is your (future) spouse or partner's name (first, middle, last):	Date of Birth:

Representation Not Guaranteed: An initial consultation with the law firm of Juliet Laycoe PC does not guarantee that the law firm will accept your case or represent you in your legal matter. If the law firm agrees to represent you, the agreement will be pursuant to a written fee agreement or confirmed by an engagement letter.