

DARRELL K. BROWN, P.A.
GENERAL CLIENT INFORMATION QUESTIONNAIRE

Our firm has a policy of charging a consultation fee of \$200.00. It is required to be paid BEFORE the conference with the attorney. Please pay the receptionist when you have completed and are handing in this form.

Today's Date: _____

1. Personal and Family History

Full name:

| | | | |
|-------|--------|--------|------|
| First | Middle | Maiden | Last |
|-------|--------|--------|------|

Present home address:

| | | | |
|-----------------|------|-------|----------|
| Street/P.O. Box | City | State | Zip Code |
|-----------------|------|-------|----------|

Telephone: _____

| | |
|--------|--------|
| (Home) | (Cell) |
|--------|--------|

Email Address: _____

Social Security No.: _____ - _____ - _____ Driver's License #: _____

County of Residence: _____ State of License: _____

Place of Employment: _____

Position Held: _____ Work Phone: (_____) _____ - _____

2. Case

Type of matter you wish our firm to handle: _____

3. Name(s)

Have you ever used, or been known by, any other name than that shown above? If so, list here each other name, and state when and why each other name was used:

4. Past Residences

State the addresses where you have resided during the past 10 years, and the period of time at each residence, including dates:

5. Personal Data

Place of birth: _____ Date: _____

Have you ever used any other date or place of birth? _____

If so, explain: _____

6. Marriage

Are you presently married? _____

Date of marriage _____ Place of marriage _____

Full name of spouse _____

Have you ever been divorced or legally separated? _____

7. Dependents

List the names, ages and addresses of all those (including children) who are dependent upon you for support and your relationship to each:

| NAME | ADDRESS | AGE | RELATIONSHIP |
|-------|---------|-------|--------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

8. Employment History

Current employer _____

Employer's address _____

Ending date _____ Beginning date _____

Job classification _____

Beginning pay rate _____ Ending pay rate _____

Employer prior to last date _____

Employer's address _____

Ending date _____ Beginning date _____

Job classification _____

Beginning pay rate _____ Ending pay rate _____

Reason(s) for leaving _____

9. Educational Background

What education have you had, including any special job training? _____

10. Military Background

Have you been in the military service? _____

If so, give service number _____

Type of discharge _____

Dates of service _____

Reason(s) for leaving _____

11. Police Record

Under the rules of evidence, there are circumstances under which a person's prior criminal record may be relevant in a proceeding. The other attorney will make a complete investigation of your background, and we must be **PREPARED AGAINST** development of unfavorable evidence. List here any arrest(s) and state and date, place, charge, court, case number and outcome:

