

# CLIENT INFORMATION SHEET

Please Print Clearly

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Driver's License/State: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Telephone: Home- (\_\_\_\_) \_\_\_\_\_ Cell- (\_\_\_\_) \_\_\_\_\_

Work/Message- (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Spouse: \_\_\_\_\_ SS#: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Driver's License/State: \_\_\_\_\_

Spouses Employer & Address: \_\_\_\_\_

Nature of Consultation: \_\_\_\_\_

If case involves other people or business, please name:

\_\_\_\_\_

Reason for choosing this firm:

- Referral by friend or relative
- Phone book/Yellow pages
- Former Panesko Client

- Referral by Lewis County Legal Aid
- Response from Web Site
- Other: \_\_\_\_\_

Have you sought legal counsel on this issue/matter before?: *Yes* *No*

## PLEASE DO NOT WRITE BELOW THIS LINE

Responsible Attorney: \_\_\_\_\_

Time Limitation: \_\_\_\_\_

Court Appearances: \_\_\_\_\_

Additional Notes: \_\_\_\_\_