



Please Print Legibly

Date: _____ Mark this box if you have previously been a client of our office.

Initial Consultation Fee There will be a fee of \$100.00 for the first half hour of the initial conference, due at the time of your appointment. Regular hourly charges will apply thereafter.

Name: _____

Telephone: _____

(Street Address)

(Home)

(Mobile)

(City, State, Zip)

Date of Birth: _____

Billing Address: (If different from mailing address)

Employer: _____

(Street Address)

Phone: _____

(Work)

(City, State, Zip)

Spouse: _____

Phone: _____

Former Last Names: _____

SS#: _____ *Our office may or may not need your SS#, depending on the type of matter you are here for. Please know that we ask for your SS# for our use only, and we will do our best to protect your confidential information.

Email: _____

Please provide us with your email address so that we may communicate with you via email. If we cannot communicate with you via email, you may be charged a \$20.00 postage fee.

Today's visit is regarding: Adoption Custody/Support Modification Divorce Estate Planning
 Guardianship/Conservatorship Real Estate D Personal Injury Other - please describe below

Possible opponent(s) in this matter: _____

Other people with an interest in this legal matter, property, or issue: (i.e. co-owner of property, officers of a small corporation, etc.) _____

Emergency Contacts: _____ (_____) _____
(Name & Relationship) (Best Contact#)

Referred by (please check one): Lawyer Referral Service Previous John Wittwer Client Other
 Phone Book Friend Relative Internet search

() I hereby agree and consent that **Morley Thomas Law** may destroy or otherwise dispose of my file ten (10) years after the file is closed by **Morley Thomas Law**.

For Office Use Only: Clio Matter#: _____ File Type : _____ (Dissolution, Trust, Probate, etc.)
Retainer Quoted: _____ Filing Fee: _____ File Created: _____ Initial Ltr: _____ dictated
 Jessica Meyer John (Tre) Kennedy Tammy Schilling Sarah Kessler Jeffrey Clayson