

THE LAW OFFICE OF ERIC ALLMENDINGER

ERIC ALLMENDINGER

MEDIATOR AND ATTORNEY AT LAW

CLIENT INTAKE SHEET

The purpose of an initial consultation is for the Attorney to advise you, the prospective client, what if anything may be done for you and what the minimum fee 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 the consultation.

One of three outcomes is possible following the consultation:

- 1) You and the Attorney mutually agree to the terms of representation, or
- 2) The Attorney declines representation, or
- 3) You decide not to use the services of the Attorney.

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.

CLIENT:

1. Full Legal Name: _____ S.S.#: _____
2. Date of Birth: _____ County: _____ State: _____
3. Age (Last Birthday): _____
4. Marital Address: _____ City: _____ State: _____
5. Years at Marital Address: _____
6. Current Address: _____ City: _____ State: _____
7. Years at Current Address: _____
8. How Long a Resident of Colorado: _____
9. Telephone Numbers: (H) _____ (W) _____ (C) _____
10. Email: _____
11. Preferred Method of Contact: _____
12. Occupation: _____
13. Employer's Name: _____
14. Employer's Address: _____
15. Length of Employment: _____
16. Wages: (Hour) _____ (Week) _____ (Year) _____
17. How Many Times Married: _____
18. Dates and Place of Previous Divorce if Applicable: _____
19. Name of Previous Attorney: _____

SPOUSE:

1. Full Legal Name: _____ S.S.#: _____
2. Date of Birth: _____ County: _____ State: _____
3. Age (Last Birthday): _____
4. Marital Address: _____ City: _____ State: _____
5. Years at Marital Address: _____

THE LAW OFFICE OF ERIC ALLMENDINGER

ERIC ALLMENDINGER

MEDIATOR AND ATTORNEY AT LAW

6. Current Address: _____ City: _____ State: _____
7. Years at Current Address: _____
8. How Long a Resident of Colorado: _____
9. Telephone Numbers: (H) _____ (W) _____ (C) _____
10. Occupation: _____
11. Employer's Name: _____
12. Employer's Address: _____
13. Length of Employment: _____
14. Wages: (Hour) _____ (Week) _____ (Year) _____
15. How Many Times Married: _____
16. Dates and Place of Previous Divorce if Applicable: _____
17. Attorney Representing Spouse: _____

PARTIES' MARRIAGE INFORMATION:

1. Place of Marriage: _____
2. Date of Marriage: _____
3. Date of Separation or Last Conjugal Relation: _____
4. Wife Pregnant: _____
5. Does Wife Want Maiden Name Restored: _____
6. Wife Maiden Name: _____
7. Children:
 - a. Name: _____
 - b. Address: _____
 - c. Age: _____
 - d. Date of Birth: _____
 - e. Choice of Residence: _____
 - a. Name: _____
 - b. Address: _____
 - c. Age: _____
 - d. Date of Birth: _____
 - e. Choice of Residence: _____
 - a. Name: _____
 - b. Address: _____
 - c. Age: _____
 - d. Date of Birth: _____
 - e. Choice of Residence: _____
 - a. Name: _____
 - b. Address: _____
 - c. Age: _____
 - d. Date of Birth: _____
 - e. Choice of Residence: _____

