

The Siemon Law Firm

A Professional Corporation

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Confidential Client Intake

Today's Date:		(NOTICE: No representation is provided until a signed fee contract is received and retainer is paid)
Full Legal Name:		
S.S. No.:	DOB:	Driver's License # and Issue State
		rould only be retrieved by you. Please do not list an address where mail can be retrieved blank and call us once you have obtained a PO Box. *)
*Would you prefer that co (We <u>STRONGLY</u> suggest y	pies of all documents, when po ou create a new e-mail account wit	ossible, be sent to you via email? Yes / No EMAIL:th a new password for any communication with us).
Telephone Numbers: (Ple	ease list only those numbers that	at can be considered "safe – retrievable only by you.")
	Home: ()	Cell Phone: ()
	Work: (<u>)</u>	Facsimile: ()
	Alt # (<u>)</u>	
EMPLOYED BY:		ADDRESS:
How did you learn of our fir	rm?	
		on the day you were arrested, use as much space as necessary, write on back if necessary):
,		
OTHERS INVOLVED (inc	cluding their Attorney / write on	back if necessary)
NAME:	ADDRESS:	
HOME PHONE:	WORK PHONE:	
ATTORNEY'S NAME:		_
WHAT DOCUMENTS DO) YOU HAVE RELATED TO YO	OUR CASE: