

TODD CLEMONS & ASSOCIATES
A PROFESSIONAL LAW CORPORATION
1740 RYAN STREET
LAKE CHARLES, LA. 70601

FAMILY LAW INFORMATION SHEET

Date: _____

Name: _____

Phone Number: _____

DOB: _____ SS#: _____

Address: _____

City, State and Zip Code: _____

Home Telephone: _____ Fax: _____ E-mail: _____

Employer: _____

Your Position: _____

Employer Telephone: _____

Spouse: _____

Spouse's Employer: _____

Spouse's Employer Telephone: _____

Emergency Contact(s), (Name) (Relationship) (Telephone): _____

Names of Associated and/or Related Parties: _____

Other Side's Name: _____

Name of Opposing Counsel: _____

Place & Date of Marriage: _____

Children (Names & Ages): _____

Children's Residence: _____

Please state briefly the nature of the problem you wish to discuss with the attorney:

Has a petition been filed in court: _____ When: _____ Court Date: _____

Judge: _____

Have you been served with Papers: _____ When: _____ Court Date: _____

Judge: _____

Have you retained another attorney: _____

If so, who: _____

Have you consulted with another attorney: _____

If so, who: _____

Have you or anyone you know been here before? Who? _____

How did you hear about us? _____

TO BE COMPLETED BY STAFF:

Initial and Date the Following Items When Completed:

Fee Contract: _____ Engagement Letter: _____ Case Entered on Master List: _____

Prescription/Time Deadline/Hearing Date: _____

Form Completed By: _____