

CONSULTATION FORM

PLEASE PRINT:

DATE: _____

YOUR NAME: _____ BIRTH DATE: _____

SPOUSE'S NAME: _____ BIRTH DATE: _____

YOUR MAILING ADDRESS: Street: _____
City, State and Zip: _____

HOME TELEPHONE NUMBER: (_____) _____

CELL/PAGER NUMBER: _____ FAX NUMBER: _____

E-MAIL ADDRESS: _____

IS YOUR EMAIL PRIVATE? _____ CAN YOU RECEIVE TEXT MESSAGES ON YOUR
PHONE AND IS IT PRIVATE? _____

COUNTY OF RESIDENCE: _____ DATE OF MARRIAGE: _____

YOUR EMPLOYER: _____

YOUR EMPLOYER'S ADDRESS: _____

WORK TELEPHONE NUMBER: (_____) _____

E-MAIL ADDRESS: _____

FAX NUMBER: _____

OCCUPATION: _____ HOW LONG THERE: _____

SPOUSE'S EMPLOYER: _____

SPOUSE'S EMPLOYER'S ADDRESS: _____

SPOUSE'S WORK TELEPHONE NUMBER: (_____) _____

SPOUSE'S HOME ADDRESS AND TELEPHONE NUMBER, IF DIFFERENT: _____

SPOUSE'S CELL PHONE NUMBER, IF DIFFERENT: _____

SPOUSE'S E-MAIL ADDRESS: _____

SPOUSE'S FAX NUMBER: _____

SPOUSE'S OCCUPATION: _____ HOW LONG THERE: _____

YOUR SOCIAL SECURITY NUMBER: _____

YOUR DRIVER'S LICENSE NUMBER: _____

YOUR SPOUSE'S SOCIAL SECURITY NUMBER: _____

YOUR SPOUSE'S DRIVER'S LICENSE NUMBER: _____

NAME, ADDRESS, AND PHONE NUMBER OF FRIEND OR RELATIVE WE MAY CONTACT ON
AN EMERGENCY: _____

MINOR CHILDREN'S NAMES: SEX DATE OF BIRTH: BIRTHPLACE: SOCIAL SEC.#

- HAS ANY MEMBER OF YOUR FAMILY EVER HAD A CONSULTATION WITH ELENA KRITZER BEFORE? () NO () YES, NAME: _____
- DO YOU CURRENTLY HAVE AN ATTORNEY? () YES () NO
- HOW DID YOU HEAR OF THE LAW FIRM? _____

We charge only \$50.00 for an initial consultation which is due prior to the consultation with the attorney.
ASSETS- DO YOU OWN OR ARE YOU BUYING:

	(YES)	(NO)	
Real Property:	()	()	Location: _____
Vehicle (cars, trucks, etc.):	()	()	Yr/Model: _____
Checking Accounts:	()	()	Balance: _____
Savings Accounts:	()	()	Balance: _____
Household Furnishings:	()	()	Resale Value: _____
Jewelry and Collections:	()	()	Resale Value: _____
Stocks and Bonds:	()	()	Value: _____
Retirements Benefits	()	()	Describe: _____
Life Insurance:	()	()	Cash Value: _____
Personal Injury Claims:	()	()	Describe: _____
Business Interests:	()	()	Describe: _____

What is your monthly take home pay? \$ _____ Your Spouse's \$ _____

(YES)	(NO)
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Do you currently have an attorney _____

Are you involve in a lawsuit? _____

If so, please describe: _____

Have you ever filed a bankruptcy before? _____

Your spouse? _____

Has any of your personal or real property ever been repossessed or foreclosed? _____

If so, please give details: _____

PLEASE LIST ALL OF YOUR BILLS/CREDITORS:

Creditors Name	Amount Owed	Months Payments	Months Behind	Collateral Pledged
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				
6. _____				
7. _____				
8. _____				
9. _____				
10. _____				

Please use the reverse side if necessary.