## Law Office of Sharon Curtis, LLC

ATTORNEY, COUNSELOR & MEDIATOR BOARD CERTIFIED IN CRIMINAL LAW TEXAS BOARD OF LEGAL SPECIALIZATION

## **CLIENT INFORMATION SHEET**

None of the information that you provide in this sheet can be used without your consent. Please answer these questions fully and truthfully which will end up saving you time, money, and giving us a better chance of success in your case.

Interview Date:		
Client's Name:		
Address:		
CityState_		
Phone Number(s): Home:	Cell:	
Work:	Fax:	
Email address:		
What is the best way to reach you by r	mail or email?	
Age: Date Of Birth: / /	TX. Driver's License #:	
Are you a U.S. Citizen?yes	no If not, what is your s	tatus in the U.S.?
Social Security #:	Class o	of Driver's License:
Physical Characteristics: Race	Height W	eight
Hair Color Eye Color _	Marital Status:	Spouse's Name
Your Occupation	Employer	
Employer's Address:		
How long have you been Employed?	Previous En	nployment
Emergency Contact Person:	Relation to y	/ou:
Phone Number(s): Cell	home	office
Address:		
Email address:		
Spouse's Occupation	Employer	
Spouse's Cell Phone:	Spouse's Work Phone:_	
Children and Dependents		
Name Age A	ddress (If different)	

Parents: Mother's Name		Fath	er's Name:		
Address					
Cell Phone:		Home Phone			
Available to testify favor	rably on you	ır behalf?			
CRIMINAL HISTORY					
PRIOR ARREST(S):	Year:	County:	Result:		
CURRENT OFFENSE(S			Date of Offense:	_	
DI COCC			T: COCC		
Place of Offense:					
			Place of Arrest:		
			Bond Amount:		
what happened!.					
Was a search warrant pr	oduced? Ple	ease explain the e	vents that transpired:		
Please explain?				<u></u>	

Please tell us everything	g else you believe will help us in the	handling of your case: Attach an additi	onal sheet i
WITNESSES:			
Name:	Address:	Cell/Home Phone:	
1			
2			
3			
How did you learn abou	ut our services?		
Thanks for taking the ti	me to provide us this information.		
Client Signa	ature	Date	

If mailed, please send to:

**Law Offices of Sharon Curtis** 

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