

MULLINS LAW FIRM, P.A.

GENERAL INITIAL INTERVIEW FORM

DATE OF CONSULTATION: _____

A consultation fee of \$200.00 is due at the time services are rendered. Invoices are not issued for consultations.
Please answer each and every question so that we may better serve you. If a question does not apply to you, please indicate by inserting a "N/A". Thank you.

Name: _____

Address: _____

City, State and Postal Code: _____

Home Phone: () _____ Work Phone: () _____

Cell Phone: () _____ Email Address: _____

Driver's License Number and State: _____

Employer: _____

Employer's Address: _____

Occupation: _____ Social Security Number: _____ - _____ - _____

Date of Birth: _____ Spouse's Date of Birth: _____

Spouse's Name: _____

Spouse's Employer: _____

Spouse's Employer's Address: _____

Spouse's Occupation: _____ Work Phone: () _____

Nature of Problem: _____

Have you met with other attorneys regarding this matter? If so, how many? _____

How were you referred to us? _____ Friend _____ Phone Book _____ Newspaper _____ Television _____ Internet
_____ Other: _____

Fee Quoted, if any: _____