

TRAFFIC TICKET -INITIAL INTERVIEW FORM

Date: \_\_\_\_\_

A consultation fee of \$200.00 is due at the time services are rendered. We do not issue bills for consultations.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, state and zip code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Pager: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Occupation: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

How did you learn about us? Please circle one:      FRIEND      TELEPHONE BOOK  
NEWSPAPER      or      OTHER: \_\_\_\_\_

Ticket(s) Received: \_\_\_\_\_

\_\_\_\_\_

Court Date: \_\_\_\_\_

Have you ever been ticketed before? \_\_\_\_\_

Charges \_\_\_\_\_

What are your current Points on your driver's license? \_\_\_\_\_

Fee Quoted, if any: \_\_\_\_\_