

**EPPLEY LEGAL GROUP  
CLIENT INFORMATION SHEET**

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

Legal Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Social Security: \_\_\_\_\_ Phone: \_\_\_\_\_  
Preferred Name: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_  
Email: \_\_\_\_\_  
How did you hear about us? \_\_\_\_\_

Place of Employment: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Job Title: \_\_\_\_\_

Type of Case:  Domestic Relations/Family Court  Criminal  Juvenile  
 Other \_\_\_\_\_  
Case Number: \_\_\_\_\_ County: \_\_\_\_\_  
Opposing Parties: \_\_\_\_\_  
Counsel Representing Opposing Parties: \_\_\_\_\_  
If divorce, are you currently remarried?  No  Yes, Spouse's Name: \_\_\_\_\_  
Child #1: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Parent: \_\_\_\_\_  
Who does the child reside with? \_\_\_\_\_ Is there a court order in place?  Yes  No  
Child #2: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Parent: \_\_\_\_\_  
Who does the child reside with? \_\_\_\_\_ Is there a court order in place?  Yes  No  
Child #3: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Parent: \_\_\_\_\_  
Who does the child reside with? \_\_\_\_\_ Is there a court order in place?  Yes  No

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Is there now or has there ever been Children Services involved in your case:  Yes  No

If so when? : \_\_\_\_\_

Please provide a brief description of your case:

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Please list anyone it is okay to speak with concerning your legal matter:

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

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

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

Is it Okay to leave detailed voice messages for you: Yes \_\_\_\_\_ No \_\_\_\_\_?

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only:

Opposing Counsel: \_\_\_\_\_ Contact #: \_\_\_\_\_

Assigned to: Attorney: \_\_\_\_\_ Paralegal: \_\_\_\_\_