

**GCHLAW LLC
CLIENT INTAKE FORM**

First Name (client)		Middle Name (client)		Last Name (client)	
Former Names				Today's Date	
Street Address			City		State
Zip					
<input type="checkbox"/> Billing or <input type="checkbox"/> Mailing Address (if different)					
Home Phone		Work Phone		Cell Phone	
Fax Number					
Social Security No.		Birthdate		Driver's License No.	
E-Mail Address					
Employer			Employer's Address:		
Length of Employment ____ years ____ months					
Who referred you to us?			Name and telephone number of person to contact in case of emergency		
Have you consulted other attorneys regarding this matter? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, complete →		1. Attorney's name			Date consulted
		2. Attorney's name			Date consulted
		3. Attorney's name			Date consulted
Do you have legal insurance? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, name of insurer				If yes, policy or group ID number	
For conflicts purposes, list additional clients or companies you are involved with:			2.		
1.			3.		
ADVERSE PARTY INFORMATION (opposing party)					
Who is the adverse party on your case?			Any former names of adverse party?		
Adverse party's attorney			Attorney's telephone number		

INITIAL CONSULTATION

You will be billed for initial consultations with attorneys in the firm unless the attorney agrees by initialing below to waive the initial consultation fee. **If the attorney does not initial this paragraph, you will be charged for the time you spend with the attorney.** If you would like to discuss attorney fees with the attorney before your consultation begins, please check here . The hourly rates for attorneys in the firm are: Gregory C. Hansen - \$325; associate attorneys - \$135 to \$195.

Please check here indicating that you have read and agree to the above.

If the attorney agrees to take your case you may be asked to sign a detailed attorney/client fee agreement.

Initial consultation fee waived _____ [attorney initials]

PAYMENT TERMS

1. You understand that GCHLAW LLC (Attorney) has not accepted the case and will not act as your attorney until you have signed an Attorney-Client Agreement and the retainer has been received. The funds deposited in the retainer trust account belong to you until they are billed (after services are provided), at which time the funds will be transferred to Attorney's account.

2. You agree to pay Attorney at the regular hourly rates which include different rates for different attorneys, paralegals, secretaries and law clerks. The hourly office rate for paralegals, secretaries and law clerks varies depending on experience, education and productivity (currently between \$50 and \$165), but at no time will the rate be more than the Attorney's rate. E-mail correspondence is billed at .1 hour each. You understand that work performed by various members of the office will be billed at an incremental rate in accordance with the actual work performed on the file. For example, if a law clerk researches a legal issue, an attorney dictates a document from the research, and a secretary types the document, you will be billed for the time each member of the staff spends on the file.

3. Fees and costs will be billed monthly, unless otherwise agreed. All fees and costs are due and payable 10 days from the date of the statement for services rendered. A late charge of 1.5% per month may be charged on any balance not paid as agreed, but nothing contained herein shall be construed as consenting to payments being made in installments or other than as provided herein. Attorney shall have the right to cease legal work if you do not pay the statement in full monthly.

4. You understand that it is not the responsibility of any other person to pay your attorney fees and costs, even though the Attorney may ask the court to order the opposing party to pay part or all of your attorney fees and costs. The responsibility to pay the attorney fees and costs is solely your obligation.

5. Should you request Attorney to perform services on any other legal matters subsequent to the signing of this form the terms described herein shall apply to and be binding on both parties in the new matters until a new fee agreement is negotiated between you and Attorney.

I have read this the above, have received a copy of this form, and agree to the terms and conditions as stated. There are no verbal agreements between me and Attorney modifying or expanding the terms hereof.

Client

Date: _____