



Investigative & Forensic Agency
10950 San Jose Blvd, 130
Jacksonville, Florida 32223
Agency: A1600147

Office: 904-377-4956

Toll-Free: 888-255-8974
Facsimile: 866-269- 0273

Re: Your Consultation Request

Dear Potential Client:

Thank you for contacting Boykin & Associates Investigative & Forensic Agency regarding your search for any Private Investigator/ Forensic Examiner. As part of your interest in retaining an Investigator/Forensic Examiner, we will need to review pertinent documents and discuss your objectives and options as well as whether we will be able to review in these matters. If we are unable to assist you with your case, we will notify you promptly.

Attached, please find a Consultation Form. The Consultation Form will assist us in evaluating your case and any Investigative decisions. Please complete the Consultation Form and fax or e-mail it back to our office with copies of any documents that you believe will be helpful to our review of your case.

Facsimile: 866-269-0273

Email: Intake@boykinassociate.com

Please contact our office when you are ready to set up the initial consultation appointment. If Boykin & Associates Investigative & Forensic Agency is retained for Investigation and Forensic Examiner or full service after the initial consultation, we will require additional items including but not limited to 1) an Investigative/Examiner-client fee agreement, and 2) a non-refundable retainer deposit.

If additional information is required, please feel free to contact our office at 888-255-8974 or 904-377-4956.

Sincerely,

Intake Division

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CONSULTATION FORM

Use and submission of this Consultation Form through our website, www.florida-privatedetective.com is provided as a convenience in communicating with Boykin & Associates Investigative & Forensic Agency. Please note that users of our web site, including those who send us electronic mail, do not enter into an Investigator-client relationship with Boykin & Associates Investigative & Forensic Agency, unless we separately and expressly confirm such a relationship and a client retainer agreement is fully executed. We do not seek to Investigate anyone based solely on a visit to our web site. Sending electronic mail to us is not necessarily a secure or confidential means of communication. If you have concerns about this, please contact our office line.

TO BE COMPLETED BY PROSPECTIVE CLIENT BEFORE THE CONSULTATION:

First Name _____ Last Name _____ DOB _____

Business Name _____ Address _____

City _____ State _____ Zip _____

Home Telephone _____ Fax _____ Email _____

PLEASE PROVIDE A BRIEF DESCRIPTION OF YOUR SITUATION



Associates LLC
Investigation & Forensics

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Name of related person involved _____ Name of Attorney _____

ADDITIONAL INFORMATION:

Spouse _____ Employer _____ Phone _____

Referred by _____/.