



HOLLAND LAW, P.C.
ATTORNEYS AT LAW

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Initial Client Consultation Form

The purpose of an initial consultation is for the attorney to advise you, the prospective client what, if anything, may be done for you, and what the fee will be. The purpose is not to render a definitive legal opinion as it may be impossible to fully assess a matter within the time frame allotted for a consultation or with the information or documents that you may be able to provide at the initial consultation.

One of three outcomes is possible following your consultation.

- A. You and the Attorney mutually agree to the terms of representation, or (After a separate document called an Attorney Employment Contract is signed. A copy will be provided to you.)
B. The Attorney declines representation, or
C. You decided not to use the services of the Attorney.

Note: The following questions will help us to understand the reason of your visit today. Your responses are protected by attorney/client privilege and will be held in strict confidence.

Name: Last First Middle or Maiden

Address: Number Street City State Zip Code

Cell Phone: () Home Phone: ()

Other Phone: () Email:

Are you a U.S. Citizen? YES NO
If not, what is your current immigration status?

YOUR IMMIGRATION STATUS WILL NOT BE SHARED WITH ANYONE

CASE TYPE:

- ADOPTION CRIMINAL LW & T REAL ESTATE
 - CHILD CUSTODY DIVORCE MALPRACTICE TRAFFIC VIOLATION
 - CHILD SUPPORT DUI MOTOR VEHICLE ACCIDENT
 - COLLECTIONS EMPLOYMENT PERSONAL INJURY
 - CONTRACT ESTATE
 - OTHER _____
-

Are there other parties involved? (Examples: a friend, an employer, a neighbor, signor of a contract, etc. This should include people or parties on either side of your issue)

Party: _____ Relationship: _____
Party: _____ Relationship: _____
Party: _____ Relationship: _____

Are we the first attorneys you have consulted regarding this matter? YES NO
If no, why didn't you hire that attorney? _____

Marital Status: Married Single Divorced Widowed Separated

Driver's License #: _____ Social Security #: _____

Are you known by any other names? YES NO

If yes, names (s) _____
(A fictitious name, a nickname, a former name, your maiden name, etc.)

Where are you employed? _____

May we contact you there? YES NO Work Phone: (____) _____

Do you have a pending court date? YES NO
If so, when and where? _____

Have you been to Court on this matter? YES NO
If so, when? _____

If your mail is returned as undeliverable or your telephone service terminated, please provide the name of someone (friend or relative) you believe will always know how to contact you and that you authorize us to contact.

Name: _____ Relationship: _____

Address: _____
 Number Street City State Zip Code

Phone No.: (_____) _____

How did you learn of our office?

PLEASE READ CAREFULLY & Sign Below

Following your initial interview, if you agree to hire the Attorney, and the Attorney agrees to represent you, you will both sign an Agreement for Representation. The Agreement for Representation will set forth the terms and conditions of representation.

If the Attorney is willing to represent you and you decide not to sign an Agreement of Representation today, you are strongly urged to schedule a second appointment with the Attorney at the earliest possible time or to immediately consult with other legal counsel to protect your rights.

NOTICE: This office does not represent you with regard to the matters set forth by you herein in this information sheet or discussed during your consultation, unless and until, both you and the Attorney execute a written Attorney Employment Contract.

If the Attorney does not agree to represent you, this includes not representing you with regard to the matter set forth by you on this information sheet, nor any other matters you may discuss with the Attorney during your consultation. If your legal problem(s) involve a potential lawsuit, it is important that you realize a lawsuit must be filed within a certain period of time called a Statute of Limitations. Therefore, the Attorney strongly urges you to *immediately* consult with another attorney to protect your rights. The Attorney's decision not to represent you should not be taken by you as an expression regarding the merits of your case.

Your signature acknowledges only that you received a copy of this completed information sheet and does not mean you have hired the Attorney.

SIGNATURE _____ DATE ____ / ____ / ____

This portion to be completed by the Attorney

- Will represent (see Attorney Employment Contract attached)
- Will investigate and report (Schedule a follow-up conference for ____ days)
- Representation declined – Letter of declination will be sent.
- Party will “think about it” and get back with us – No action to be taken at this time.
- Client declined Representation at this time.

Interviewed by _____ this _____ day of _____, 20__

Billing Agreement (circle one)

G = General Retainer (non-refundable - Amount \$ _____ (plus costs)

S = Special Retainer (refund unused portion) – Amount \$ _____ /Hourly Fee of \$ _____
(plus costs)

F = Flat Fee – Amount \$ _____ (plus costs)

H = Hourly fee - \$ _____ (plus costs)

C = Contingency Fee - _____ % of Recovery (plus costs)

B = Blended Fee - \$ _____ Hourly and _____ % of Recovery
Not to Exceed _____ % of total whichever is greater (plus costs)

N = No Charge/Pro-bono (plus costs)

Notes: _____

OUR CLIENT: _____

OPPOSING PARTY: _____

MATTER: _____