

**LAW OFFICES OF STEVEN K. DEIG, LLC
CLIENT INTAKE SHEET**

HOW WERE YOU REFERRED TO OUR OFFICE (Check One):

Yellow Pages _____ Google _____ Facebook _____ (Do you remember key words used? _____)
Friend/Family _____ Attorney Referral _____ BBB _____ Sign in front of office _____ Evansville Bar Referral _____
Are you a former client _____ Consult Form Submitted _____

Attorney you were referred to: _____ Reason for appointment: _____
If someone referred you, please provide their name and address so we can thank them! _____

(PLEASE PRINT)

Address

NAME _____ **DATE** _____

First (MI) Last

ADDRESS _____ **HOME PH#** _____

CITY _____ **STATE** _____ **ZIP** _____ **CELL #** _____

EMAIL ADDRESS _____

S.S.# _____ **DATE OF BIRTH** _____ **FAX#** _____

(Do you need to be notified before faxing? Yes ___ No ___)

EMPLOYER _____ **WORK PH#** _____

EMPLOYER ADDRESS _____ **ZIP** _____

City/State

SPOUSE _____ **PHONE #** _____

First (MI) Last

ADDRESS (If different) _____

CITY/STATE _____ **ZIP** _____

SPOUSE'S EMPLOYER _____ **PHONE #** _____

EMPLOYER ADDRESS _____ **ZIP** _____

City/State

OPPOSING PARTY _____

First (MI) Last

ADDRESS _____

CITY/STATE _____ **ZIP** _____

OPPOSING COUNSEL _____ **PHONE #** _____

ADDRESS _____

CITY/STATE _____ **ZIP** _____

Please visit our website if you are satisfied with your service!!

FOR OFFICE USE ONLY

___ CLIO Contacts List
___ New Files Opened List
___ Scan Client Intake Sheet

___ Cal Check
___ Thank You Note
___ New Files Opened List on Line

ACCOUNTING

___ Fee Agreement/Retainer Received
___ Open in CLIO (Matter)
___ Log in/scan Fee Agreement