

**NINA FIELDS JACKSON**  
**ATTORNEY AT LAW**



**NEW CLIENT INFORMATION FORM**

A consultation fee of \$225.00 is due at the time of your initial visit.  
Forms of payment: Cash, Check, Visa, MasterCard and Discover.

Today's Date: \_\_\_\_\_

**BACKGROUND INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SS #: \_\_\_\_\_

Number of Children: \_\_\_\_\_

Child's Name	Date of Birth	SS #

Next of Kin (who would know your whereabouts): \_\_\_\_\_  
Name, Address, Phone Number

**SUBJECT OF CONSULTATION**

Please state briefly the nature of the problem you wish to discuss with us today: \_\_\_\_\_

If the nature of your problem is family-related, please indicate any potential opposing party (such as ex-husband, ex-wife, boyfriend, girlfriend, etc.):

If your problem is family-law related, please state county/state of marriage, date of marriage, date of separation, and, if applicable, date of divorce:

County/State of Marriage: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_ Date of Separation: \_\_\_\_\_ Date of Divorce: \_\_\_\_\_

State whether or not you have any legal documentation, such as separation agreement, divorce decree or other prior court orders:

**REFERRAL**

How did you hear about our office? \_\_\_\_\_

**FOR OFFICE USE ONLY** CONFLICT CHECKED:   
COURT FILE NO.: \_\_\_\_\_ OUR FILE NO.: \_\_\_\_\_ RETAINER/HOURLY RATE QUOTED: \_\_\_\_\_