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CLIENT INTAKE—GENERAL CIVIL

Name _____
Last First Middle or Maiden

Address _____
Number Street City State Zip

Home Phone (____) _____ **Cell** (____) _____

Briefly explain what you may need advice about or assistance with today:

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

Party _____
Relationship _____

Party _____
Relationship _____

Party _____
Relationship _____

On the lines below, list the documents (papers) that you think may help us to understand the issues.

1. _____
2. _____
3. _____

(NOTE: Any documents you supply that are important to your matter will be photocopied, with your permission, and your originals returned to you at the conclusion of the initial interview.)

Ideally, if things turn out precisely the way you want, what would the outcome be?

Knowing that there are no guarantees, what can you accept?

Please classify your urgency in concluding this matter? (check one)

- Critical – Personal safety or continuation of business depends on it.**
- Very important – severe hardship, personal or financial inconvenience if matter is not resolved quickly.**
- Important – Matter interferes with business or personal financial stability.**
- Needs to be done, but no immediate hardship in the interim.**
- Just thought I'd see if it was worth pursuing, but I'm not counting on anything.**
- Just wanted to know what my rights are? I'll then let you know after I think about it.**

If the matter involves payment of money you feel you are owed, how long can you wait before getting paid? _____

(Days, Weeks, Months, Years)

Are we the first attorneys you have consulted regarding this matter? [] Yes [] No
If No – Have you terminated the other attorney? [] Yes [] No Please Explain:

Have you ever been represented by an attorney before? [] Yes [] No
If Yes – Please state the circumstances

How will you pay for your attorney's fees in this matter?
[] Check today [] Cash today [] Contingency Fee
[] Credit Card

Marital Status: [] Married [] Single [] Divorced [] Widowed [] Separated

Drivers License # _____ Social Security # _____

Are you known by any other names? [] Yes [] No
If yes name(s)

(A fictitious name, a nickname, a former name, your maiden name etc.)

Where are you employed?

May we contact you there? [] Yes [] No Phone No. (____) _____

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

Name _____

Relationship _____

Address _____

Phone No. (____) _____

How did you learn of our office [] A friend [] Bar Referral
[] Our Web Page [http:// www.kimmeylaw.com](http://www.kimmeylaw.com) [] Former Client [] Other