

It is important that you answer <u>EVERY</u> question----- Truthfully-Accurately-Completely

Our ability to properly defend you depends on this information.

IF YOU CHANGE YOUR ADDRESS OR PHONE NUMBER—

CALL US IMMEDIATELY SO WE WILL CAN NOTIFY YOU OF ISSUES WITH YOUR CASE.

CHARGES		INITIAL COURT DATE				
NAME						
AGE DOB	SS #		DL#			
ADDRESS		CITY				
STATEZIP COD	E EM	AIL ADDRESS	5			
HOME PHONE	REFERR	ED BY				
CELL PHONE	BONDSM	IAN				
HEIGHT WEIG	HTRACE	SEX	HAIR	EYES		
EDUCATION	EMPLOYMENT_		Pho	one		
PHYSICAL ILLNESSES_						
MENTAL ILLNESS						
INCOME :to \$25,000						
DO YOU HAVE/USE: AD DIABETES AMBII						
DO YOU HAVE HEALTH	I INSURANCE THAT	COVERS REI	HAB?			
OFFICER TAKE YOUR	LICENSE?F	HAVE A CDL?	PILOT	LICENSE ?		
DRIVE COMPANY CAR	? DRIV	VING COMPA	NY CAR AT AR	REST?		
CAR YOU DRIVE: YEAR OTHER CAR: YEAR	R MAKE		MODEL			
Offica CAR: I EAR	RMAKE		WIODEL			
DATE OF ARREST	TIME I	OCATION				
WERE YOU ADVISED O	F YOUR RIGHTS?	DID YOU A	ASK FOR AN A'	TTORNEY?		

WA	S EVIDENCE SEIZED?	DID YOU TAKE F	IELD SOBRIETY TEST?		
BR	EATH TEST RESULTS	ACCIDENT?	INJURIES ?		
WI	TNESSES:				
ON	PROBATION NOW?	OTHER PENDING CH	IARGES?		
EVI	ER CONVICTED OF A FEL	ONY? TWO OR MO	ORE FELONIES IN LIFETIME?		
HA	D A PRIOR LICENSE SUSP	ENSION DUE TO ALCOI	HOL? WHEN?		
Are	you a Veteran? Explain_				
AT	ΓENDED/APPLIED FOR DE	RUG-DUI-VETERANS CO	OURT IN THE LAST 5 YEARS?		
	OR DUI: TRAVEL TO C OU HAVE BEEN ARRES		STRICTED OR IMPOSSIBLE IF Signature		
	PLEASE ADVISE US <u>IMN</u> FAILURE TO DO SO COU	<u>MEDIATELY</u> IF YOU ARE LLD RESULT IN YOU BEI	•		
•	WAS THE VICTIM NATI	VE AMERICAN? YES	NOI DON'T KNOW		
WHAT IS YOUR BIGGEST FEAR REGARDING THIS CASE?					
WH	IAT WOULD BE THE <i>BEST</i>	OUTCOME OF THIS CA	SE FOR YOU?		
WHAT WOULD BE AN ACCEPTABLE OUTCOME OF THIS CASE FOR YOU?					
I ACKNOWLEDGE THAT <u>NO WORK WILL BEGIN</u> ON MY CASE, <u>NOR WILL A REQUEST BE MADE TO DPS</u> TO PROTECT MY DRIVER'S LICENSE UNTIL A FEE					
AGREEMENT HAS BEEN EXECUTED AND THE RETAINER PAID.					
ABOVE REPRESENTATIONS TO ATTORNEY ARE TRUE, CORRECT, AND COMPLETE.					
7					

DATE

<u>LIFETIME ARREST HISTORY</u> (List <u>EVERY</u> arrest *including* deferred and expunged cases):

<u>DATE</u>	<u>PLACE</u>	<u>CHARGE</u>	END RESULT
I acknowledge to jail.	that failure to d	lisclose <u>ALL</u> arrests to m	y attorney may cause me to go
SIGNATURE		DATE	