

KARIN JOHNSON CHATFIELD, LLC

CLIENT INTAKE—GENERAL

<i>Date:</i>		<i>Referred by:</i>	
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<i>Name (first)</i>		<i>(middle)</i>		<i>(last)</i>		
<i>Address</i>				<i>County</i>		
<i>City</i>			<i>State</i>		<i>Zip</i>	
<i>Home phone</i>		<i>Cell</i>		<i>Work</i>		
<i>Email</i>				<i>Preferred Contact #</i>		
<i>Alt. Email</i>				<i>Prefer billing sent to email address:</i>		

<i>Employer</i>		<i>Occupation</i>			
<i>Address</i>					

<i>Age</i>		<i>Date of birth</i>			
<i>Colo. Resident since</i>		<i>SSN</i>			
<i>Name of Spouse / Domestic Partner</i>					

What is the issue you need addressed today?

<i>Who is the adverse party?</i>	
<i>Please list your current / former attorney(s)</i>	