

# Scott Law Offices

A Professional Limited Liability Company

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## CLIENT INFORMATION

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

Client's Name(s): \_\_\_\_\_ Booking # / Jail: \_\_\_\_\_

Home Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Fax number: \_\_\_\_\_

**For purposes of protecting your confidentiality, please indicate how we may contact you:**

Home address:	Yes / No	Mailing address:	Yes / No
Home phone:	Yes / No	Work phone:	Yes / No
Cell phone:	Yes / No	E-mail address:	Yes / No
Fax:	Yes / No		

SSN: \_\_\_\_\_ Employer: \_\_\_\_\_

How did you hear about Scott Law Offices? \_\_\_\_\_

## CASE INFORMATION

Case Number: \_\_\_\_\_ Court/Judge: \_\_\_\_\_

Charges: \_\_\_\_\_

Priors: \_\_\_\_\_

On Probation / Release: \_\_\_\_\_

Hearing Dates: \_\_\_\_\_

Trial Management Conference: \_\_\_\_\_ Trial: \_\_\_\_\_

Plea offer: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Assigned Prosecutor: \_\_\_\_\_ Phone: \_\_\_\_\_