



RICE LAW, PLLC
FAMILY LAW NEW CLIENT INFORMATION SHEET

Consultation Fee Due Before Initial Consultation

Consultation Fee: \$300.00 (Charles E. Rice, III) or \$175.00 (All Other Attorneys)

(Consultation Fee Covers First 90 Minutes; Attorney's Hourly Rate Billed Thereafter)

The purpose of an initial consultation is for the attorney to advise you, the prospective client what if anything, may be done for you, and to estimate the minimum legal fees required. The purpose is not to render a definite legal opinion as it may be impossible to fully assess a matter within the time frame allotted for a consultation with the information/documents you may be able to provide at the initial consultation.

One of three outcomes is possible following your consultation: 1) you and the attorney mutually agree to the terms of representation and each sign a Contract for representation (no client is represented by Rice Law, PLLC without a written contract); or 2) the attorney declines representation; or 3) you decide not to use the services of the attorney.

The following information is necessary to help us understand the purpose for your visit today and to assist us in assessing your needs. Please provide complete answers. Your answers are protected by attorney/client privilege even if you do not become a client of the firm and will be held in strict confidence.

Appointment Date _____

Purpose For today's appointment? (Check all that apply)

- | | |
|-------------------------------------|-------------------------------------|
| _____ Divorce | _____ Separation Agreement |
| _____ Property Division | _____ Spousal Support (PSS/Alimony) |
| _____ Child Custody/Visitation | _____ Child Support |
| _____ Other (please specify): _____ | |

Referred by:

- | | | |
|----------------------|--------------------|--------------------------|
| _____ Friend | _____ Yellow Pages | _____ NC Bar Association |
| _____ FindLaw | _____ Lawyers.com | _____ Rice Law Website |
| _____ Other Attorney | _____ Other _____ | |
| _____ LegalFish | | |

(I) Your Information

Full Legal Name (First, Middle, Last) _____
Maiden

List other Names, Nicknames _____
Gender

Street Address (Secure for mailing? Yes No) _____
City State Zip

Secure Mailing Address _____
City State Zip

(____) ____-____ (____) ____-____ (____) ____-____ (____) ____-____

Home Phone Work Phone Cell Phone Fax (Home Work)

_____@_____ @_____

Home Email (Preferred? Yes No) Work Email (Preferred? Yes No)

____-____-____
Social Security # _____
Driver's License Number DL State County of Residence

____/____/____
Birth Date _____
Birth Place (County/State) Country of Citizenship

Rice Law New Client Information Sheet (Continued)

 Highest Grade/Degree Educational Institution Date Completed

 Military Service Dates Rank Discharge Date

 Employer Name Address (Street, City, State, Zip)

 Occupation Annual Income Normal Work Hours (Start/End)

Current Marital Status

 Date of Marriage Place of Marriage (County, State) Date of Separation

Do you have a prenuptial agreement? Yes No

Do you have a will? Yes No

Do you have a power of attorney? Yes No

Were you previously married? Yes No

If yes, to whom and how did previous marriage(s) end? _____

 Are we the first attorneys you have consulted regarding this matter? Yes No

If no, why didn't you hire their services? _____

 Have you ever been represented by an attorney before? Yes No

If yes, what were the circumstances? _____

(II) Children's Information *(If you do not have children, skip to Section III)*

#	Full Legal Name	Social Security Number	Date of Birth	Birth Place (County/State)	Age
1					
2					
3					
4					
5					

For The Past Five (5) Years, The Minor Children Have Lived As Follows:

Period of Residence		Address	Name Of Person Lived With	Present Address Of Person
From	To			

Rice Law New Client Information Sheet (Continued)

(III) Opposing Party Information

Full Legal Name (First, Middle, Last)		Maiden	
List other Names, Nicknames		Gender	
Street Address	City	State	Zip
() -	() -	() -	() -
Home Phone	Work Phone	Cell Phone	Fax (<input type="checkbox"/> Home <input type="checkbox"/> Work)
-- --			
Social Security #	Driver's License Number	DL State	County of Residence
/ /			
Birth Date	Birth Place (County/State)	Country of Citizenship	
Highest Grade/Degree	Educational Institution	Date Completed	
Military Service Dates	Rank	Discharge Date	
Employer Name	Address (Street, City, State, Zip)		
Occupation	Annual Income	Normal Work Hours (Start/End)	
Current Marital Status			
Date of Marriage	Place of Marriage (County, State)	Date of Separation	
Was the opposing party previously married? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, to whom and how did previous marriage(s) end? _____			

(IV) Pending or Actual Litigation Information

Has a court action been filed? Yes No

Have you appeared in Court with opposing party? Yes No

Do you have copies of any documents (Court decrees) related to this matter? Yes No

[Attach all documents/papers you have brought with you. Note: Any documents we feel are important to your legal matter will be photocopied, with your permission, and all originals will be returned to you today.]

Is domestic violence an issue? Yes No

Have you attempted to mediate? Yes No

Are you or a person involved in this matter currently pregnant? Yes No

Full Name of Opposing Party's Attorney

Other Party Involved	Relationship		
_____	_____		
Case Docket #	Judge Assigned	Date Complaint Filed	Your Answer Due Date
_____	_____	____/____/____	____/____/____

Rice Law New Client Information Sheet (Continued)

(V) Child Support/Spousal Support (Also complete Section VI)

Who carries medical insurance policy? I do Opposing Party No Coverage
 Who is covered by medical insurance policy? Children Myself Opposing Party No Coverage
 What is monthly cost? \$ _____
 Who pays for childcare? I do Opposing Party No Child Care No Cost
 What is monthly cost? \$ _____

(VI) Property Division

Vehicles Owned				
Year, Make, Model	Titled To	Amount Owed	Payments Made by	Who has it?
Marital Home <input type="checkbox"/> Rent <input type="checkbox"/> Own				
Address/Location	Date Purchased	Purchase Price	Monthly Mortgage Amount (\$)	
Current amounts owed Are as follows:	1st Mortgage	2 nd Mortgage		
Other Real Estate				
Address/Location	Date Purchased	Purchase Price	Monthly Mortgage Amount (\$)	
Current amounts owed Are as follows:	1st Mortgage	2 nd Mortgage		
Other Assets at Date of Separation				
Checking Account(s)	Name of Bank(s)	Whose Name	Amount	
Savings Account(s)				
Pensions, Retirement, IRAs, Etc.				
Other Assets	Description			

Rice Law New Client Information Sheet (Continued)

Debts		
Creditor	Balance Due & Whose Name Debt Is In	Paid By

(VII) Expectations

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?

How will you pay for your attorney fees in this matter?

- Check
- Cash
- Credit Card

Following your initial consultation, if the attorney agrees to represent you, you will be provided with a Contract for Representation. The contract will set forth the terms and conditions of representation. You should return a copy of the signed contract to our office at your earliest convenience or hire another attorney to protect your rights. Notice: This law firm does not represent you unless and until both you and the attorney sign a written contract.

_____ (SEAL) _____
 Signature Date

We normally follow up with all prospective clients after the initial consultation within two weeks. Would a follow up phone call be acceptable? _____ Preferred phone number: _____

(Firm Use Only)

- Provided Contract
- Provided Estimate of \$_____ Retainer & \$_____ Trust Fund Deposit
- Route to RDD BAM to finalize Amicus file setup
- Route to RDD BAM to enter time/fees
- Route to Front Desk Receptionist to Scan/File