

## CONFIDENTIAL QUESTIONNAIRE

This confidential questionnaire is for background information  
to help the attorney evaluate your case.

This is not an agreement to provide legal services of any kind.

<b>ABOUT YOU</b>	
Name	
Age	
Date of Birth	
Home Mailing Address	
City	
State	
Zip	
Home Street Address	
City	
State	
Zip	
Home Telephone	
Home Fax	
Work Telephone	
Work Fax	
Mobile Telephone	
Other Telephone	
E-mail Address	
Social Security Number	
<b>WHAT HAPPENED?</b>	
Please describe what happened that has caused you to seek the advice of an attorney. State <u>when</u> , <u>where</u> , <u>what</u> , <u>why</u> and <u>how</u> it happened.	

<b>WHAT DO YOU WANT?</b>	
What do you want the attorney to do for you?	