

Bardol Law Firm, LLC

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Webster Groves, MO 63119

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PLEASE NOTE: All new clients shall receive one free sixty-minute consultation. If the initial consultation lasts more than an hour, the client will be billed at \$150 per hour.

New Client: Prior Client:

File Number: _____ Date Form Completed: _____

Client Information

First Name: _____ Middle Name: _____ Last Name: _____

SSN: _____ Maiden Name: _____

DOB: _____ Birthplace: _____

Address: _____

City, State, Zip: _____

Home Telephone: _____ Work Telephone: _____

Cell: _____ What's the best number to contact you? _____

Can we contact you by mail at the above stated Address Yes No

If No, where may we contact you by mail: _____

Email: _____

Can we send you bills at the above-mentioned e-mail Yes No

If not, where should bills be forwarded to you: _____

Education Level (Highest grade completed): _____

Employer Name: _____

Employer Address: _____

Emergency Contact(s): (Name) (Relationship) (Telephone)

Marital Status: Single Married _____ Divorced _____

Date

Date

City and County of Marriage: _____

Date of Separation: _____

Prior Marriages: _____

Prior Litigation

Case Name/ Number: _____

Originating Attorney: _____

Type of Case: _____ (i.e., Divorce, Modification, Contempt)

Explanation: _____

Other Party To This Action (i.e. Spouse, Ex-Spouse, Ex-Significant Other)

First Name: _____ Middle Name: _____ Last Name: _____

Maiden Name: _____ S.S.#: _____ Ethnicity: _____

Relationship: _____

DOB: _____ Birthplace: _____
Address: _____
City, State, Zip: _____
Home Telephone: _____ Work Telephone: _____
Employer Name: _____
Employer Address: _____
Attorney: _____ Education Level: _____

Children

Full Name/Date of Birth/SSN (for each one):

Referred By: Individual _____ Attorney _____

Webpage _____ Other _____

Questions for the Attorney:

FOR OFFICE USE ONLY

Initial And Date The Following Items When Completed:

Conflict Check: _____ Fee Agreement: _____
Engagement Letter: _____ Docket Entered: _____
Statute Of Limitations/Time Deadline: _____