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CLIENT INFORMATION SHEET

DATE: _____

CLIENT'S FULL NAME: _____ AGE: ____ DOB: _____

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(Aliases and other names used, maiden names, etc.): _____

ADDRESS: _____ CITY: _____ STATE: ____ ZIP: _____

TELEPHONE: _____ MESSAGE: _____ OTHER: _____

REFERRED BY: _____

CASE INFORMATION AND HISTORY

BOOKING/CITATION NUMBER: _____ ARREST/CITATION DATE: _____

CHARGES: _____

COURT DATE: _____ TIME: _____ LOCATION: _____

TYPE OF PROCEEDING: Arraignment __ Pretrial __ Preliminary Hearing __ Readiness __ Trial __ Sentencing__

ON BOND? Yes__No__ BAIL AMOUNT: _____ BOND AGENCY: _____

PLEASE LIST ANY AND ALL PRIORS: (include charges, county, date and sentence):

IS PROSPECTIVE CLIENT CURRENTLY ON PROBATION? Yes __ No__ PAROLE? Yes __ No__

