

PLEASE COMPLETE THIS FORM.

YOUR FULL LEGAL NAME: _____

HOME STREET ADDRESS: _____
City State Zipcode

HOME MAILING ADDRESS: _____
(if different from street address) City State Zipcode

EMAIL ADDRESS: _____ @ _____

BUSINESS ADDRESS: _____
City State Zipcode

HOME PHONE: _____ HOME FAX: _____

CELL PHONE: _____ BUSINESS PHONE: _____

DATE OF BIRTH: _____ YOUR SOCIAL SECURITY NUMBER: _____

YOUR OCCUPATION: _____ EMPLOYER: _____

ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA? _____ IS YOUR SPOUSE A CITIZEN? _____

SPOUSE'S NAME: _____ DATE OF BIRTH: _____

SPOUSE'S SOCIAL SECURITY NUMBER: _____ SPOUSE'S BUSINESS PHONE: _____

SPOUSE'S OCCUPATION: _____ SPOUSE'S EMPLOYER: _____

WHY DO YOU NEED A LAWYER: _____

WHO IS ADVERSE TO YOU OR OTHERWISE INVOLVED: _____

REFERRED BY: _____

CONSULTED ANY OTHER ATTORNEY ABOUT THIS MATTER? [] YES [] NO WHEN? _____ WHO? _____

DO YOU HAVE A DURABLE POWER OF ATTORNEY []YES []NO AND A CURRENT LAST WILL & TESTAMENT ? []YES []NO

You will receive copies of all legal papers and letters prepared, or received, on your behalf, unless you request that no copies be sent. Copies are charged at the rate of .25 per page. If you do NOT want copies, you must notify us in writing. All fees for services rendered, and costs incurred, are due upon presentation of our billing statement, unless other arrangements have been made in advance. Generally, a retainer and signing a fee agreement are required before services will be rendered. Where the retainer amount is less than the anticipated fee for service, a lien may be necessary. Please feel free to discuss fees and billing arrangements with the attorney. While most matters are billed on the basis of the time and effort expended and the nature of the services provided, a few matters are handled on a contingent fee basis. The attorney will inform you if your case can be accepted on a contingent fee basis.

INITIAL CONSULTATION FEE (\$75.00 to \$150.00) IS PAYABLE IN ADVANCE. READ PAYMENT POLICY ON REVERSE.

SIGNATURE _____ Date: _____

		Do Not Write Below This Line	
I.F. Pd.	Yes / No	Ret'd:	Yes / No
Phone/in-person		R.L.:	Yes / No
Follow-up?	Yes / No	Intake Attny:	

GOODMAN LAW FIRM

PAYMENT POLICY

We usually do not undertake legal representation until three (3) requirements are met:

1. There is a signed Fee Agreement;
2. We have received a *retainer* (advance of money paid by credit card, wire transfer, cash or check);
3. We have received the documents needed to begin representation.

Also, we do not undertake legal representation until we have determined that our representation of you will not conflict with our current or prior representation of others.

Charges for services rendered and any disbursements will be billed on a monthly basis, with the charges being first offset against any retainer or other credit balance then outstanding and with any additional balance being payable upon submission of our statement.

Statements not paid within thirty (30) days accrue a finance charge of eighteen percent (18%) per annum.

Unless specifically stated in a separate writing, signed by both of us, payment for our services is **not contingent** upon the outcome of any matter.

We or our agents may, from time to time, obtain credit information relating to you.

We may require adequate collateral or a lien to secure payment of any debt or potential debt owed to us.

We may terminate our representation if you do not pay us as agreed. We may terminate our engagement by providing you with notice of our termination. We will give you a reasonable opportunity to obtain substitute counsel before we cease all activity on your behalf.

If we terminate our representation, we will continue to perform such services as are reasonably required to protect your legal interests until you have obtained substitute counsel or until you have had a reasonable time in which to do so.

Termination of our representation does not affect your responsibility to pay us for the services we have provided, including any additional work required for us to facilitate an orderly turnover of matters in process at the time of termination.

CONSULT CHECKLIST

Please Complete to the Best of Your Knowledge and Return To:

Goodman Law Firm

Legal Name: _____
(First, Middle, Last)

(A) Is there an impending Deadline? Yes/No

(B) Who is the Client? _____

(C) **Who else**, if anyone, is involved in your legal matter?

(D) Are you aware of any person adverse to you that we may have represented in the past? Yes/No

(E) What **relief** do you want: _____

(F) Have you consulted any other attorney about this matter, and if so, who did you consult?

Yes/No Who: _____

(G) Whether you want a morning or afternoon consultation and provide 3 different dates when you are available.

Morning/Afternoon Dates: _____

(H) State whether you want the consultation to be telephonic, via video conference, or in-person.

Telephone/Video/In-Person

(I) State whether you have been vaccinated against COVID-19 and if so, how many times.

(II) Yes/No How many times? _____

PLEASE ATTACH THE MOST RELEVANT DOCUMENTS TO YOUR E-MAIL, SO WE CAN REVIEW THEM.

EMAIL COMMUNICATIONS

With your permission we may, from time to time, communicate with you via electronic mail (email) over the Internet. We communicate with third parties via email. If you use email, at work, to communicate with us you may be giving your employer access to our confidential and privileged communications. A work, or shared, email account is not private, not protected from disclosure, and is not confidential. You should not use a work or employment email account unless you are positive that no one other than you will ever have access to the account or the emails in the account. Similarly, you should not use a work or employment computer to communicate with us unless you are positive that no one other than you will ever have access to our communications. The use of email involves several risks including the risk that the communication may be intercepted, delayed, the communication may be routed improperly by our Internet Service Provider (“ISP”) or others, blocked by spam filters, or the communication may not be received at all. Email communications are not secure, and you assume the risk of unauthorized persons viewing such e-mails. You cannot assume that each email message copied or sent to us was opened or read unless you receive a non-automated reply message indicating that the message was actually read. While there are a variety of tools, such as encryption devices that may be used to protect the confidentiality of email communications, such devices are cumbersome to use. Accordingly, we will not encrypt email messages or take any special procedures regarding email, such as the use of encryption software, absent special prior arrangements including the payment of additional fees to cover the expenses associated with such special arrangements. To minimize problems associated with use of email, we strongly recommend that you obtain a new and separate email address to be used solely for purposes of communicating with us. We recommend that you use the first four (4) digits of the file number assigned by our firm to you followed by a period (.) followed by the first four (4) letters of your first name, followed by the @ symbol, followed by the name of your email provider. Thus, if your file number is 1234 and your first name is William, and you use Gmail, your new email address would be 1234.Will@gmail.com. If you do not want us to communicate with you via email you must inform us in writing. In the event you initiate a communication with us via email you thereby authorize us to thereafter communicate with you in the same fashion. If we initiate a communication via email and you do not immediately object to such method of communication, you thereby authorize us to thereafter communicate with you in the same fashion.

_____ I authorize Goodman Law Firm, P.C. to communicate with me via electronic mail and
(initials) understand the risks involved with such communication.

_____ I **do not** authorize Goodman Law Firm, P.C. to communicate with me via electronic mail and
(initials) prefer all communications be made using the U.S. Mail to the mailing address I provide.

(email address)

(full legal name)

(signature)

(date/time)

NOTICE WHERE LEGAL FEES PAID BY SOMEONE OTHER THAN CLIENT

PLEASE TAKE NOTICE that the rules applicable to lawyers in Arizona prohibit a lawyer from accepting compensation from one other than the client unless:

1. The client gives informed consent to the arrangement;
2. There is no interference with the lawyer's independence of professional judgment;
3. There is no interference with the client-lawyer relationship; and
4. Information relating to the representation of a client is maintained as confidential (meaning that the client's confidential information cannot be disclosed to the one paying the lawyer).

Before we accept compensation from someone other than a client, both the client and the one who is paying must agree to the above-stated terms, and must indicate their agreement by signing and dating this Notice below:

Name (printed): _____

Signature: _____

Indicate "Client" or "Payor: _____ Date signed: _____

Name (printed): _____

Signature: _____

Indicate "Client" or "Payor: _____ Date signed: _____