



DOZIER LAW

RALEIGH

CLIENT INTAKE FORM FOR CRIMINAL CASES

Name: _____

Driver's License No.: _____ State: _____

DOB: _____

Home Address:

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City: _____

State: _____ Zip: _____

Mailing Address (if other than above):

—

City: _____

State: _____ Zip: _____

Home Phone: _____ Cell #: _____

Email: _____

Employer:

—

Employer's Address:

—

City: _____

State: _____ Zip: _____

Work Telephone: _____

Education: _____

Emergency Contact:

Mailing Address (if other than above):

City: _____

State: _____ Zip: _____

Home Phone: _____ Cell #: _____

Email: _____

HOW DID YOU HEAR ABOUT OUR OFFICE:

WHAT ARE YOUR CHARGES:

—

Date of Offense: _____

Officer's Name and Department:

Prior Record:

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Name, Address & Phone Number of Possible Witnesses:

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Briefly Describe Case or Issue:
