

INTAKE

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____ Cell number: _____

Email address: _____ Fax number: _____

Date of Birth: _____ (Not Required)

How did you hear about me? _____

What is your legal problem or concern?

Are you interested in a half-hour consultation, a full hour
consultation or retaining my services?

Have you ever had another attorney for this matter? _____

Any other legal matters you would want me to handle? _____

Contact: Bonnie Mohr, Attorney, 236 W. 26th Street, Suite 303, New
York, NY 10001, 212-736-2624 x 13, bonnie@mohresq.com