

TODAY'S DATE: _____

HOMESLEY, GAINES & DUDLEY, LLP

Name: _____

Home Address: _____
First Middle Last

Mailing Address (if different): _____
Street City State Zip Code

Telephone Number: _____
Street City State Zip Code

Home Work Cell

Date of birth: _____

Employer: _____

Employer address: _____

Employer telephone number: _____

E-mail address: _____

Indicate the attorney with whom you are consulting:

T.C. Homesley, Jr. _____

Edmund L. Gaines _____

L. Ragan Dudley _____

Dustin S. McCrary _____

Reason for consulting an attorney: _____

Name of potential opposing party (if known): _____

Have you or the opposing party ever consulted or retained a member of our firm about this case or any other prior legal matter: If yes, please indicate which attorney you consulted and designate the type of legal matter in which you or the opposing party were previously involved.

OFFICE USE ONLY

Adoption, Civil Litigation, Contract Law, Corporate Law, Criminal, Domestic,
Personal Injury, Social Security, Wills and Estates, Worker's Compensation

Fee Charged: _____

Description of Representation: _____

Notes: _____