

GOLDSMITH & GUYMON

A Professional Law Corporation

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NEW CLIENT INFORMATION FORM (MINOR GUARDIANSHIPS)

The following information will assist the attorney in the initial interview and will save time (and, therefore, fees). Please print legibly. (Feel free to attach your business card in lieu of name, address, etc.) If you do not have sufficient room to complete an answer, please write on the back of the page (and so indicate). Answer to the best of your ability. You can discuss any problems or questions when you meet with the attorney.

There is generally a fee for the initial consultation, and you may leave a check with the receptionist or the attorney's secretary. If further services are agreed upon, you will be asked to sign a fee agreement and to pay a retainer.

The purpose of this initial consultation is to give you the opportunity to describe your legal problem. The attorney will then set forth your options under the law and estimate the time and expense involved. Seldom is there an easy answer to a complex legal problem, but we will do our best to answer your questions and address your concerns.

GENERAL INFORMATION

YOUR NAME: _____ DATE: _____

ADDRESS: _____

PHONE(S)HOME: _____ BUSINESS: _____

CELLULAR: _____ FAX: _____

SOCIAL SECURITY NO. _____ OCCUPATION: _____

E MAIL ADDRESS: _____

LIST THE NAME(S) OF ANYONE ACCOMPANYING YOU TODAY:

WHO REFERRED YOU TO OUR FIRM? _____

TO WHICH ATTORNEY WERE YOU REFERRED? _____

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GUARDIANSHIP INFORMATION:

NAME OF PROPOSED WARD/MINOR _____

DATE OF BIRTH OF MINOR: _____

DO YOU HAVE A COPY OF THE MINOR'S BIRTH CERTIFICATE? YES NO, if yes, do you have it with you today? If no, state and county where minor was born.

MINOR'S MOTHER: Name and Address: _____

MINOR'S FATHER: Name and Address: _____

IS MINOR A NEVADA RESIDENT?: YES NO

WHERE DOES THE MINOR RESIDE: _____

HOW LONG HAS MINOR RESIDED THERE?

WAS THE MINOR PLACED WITH YOU THROUGH THE COURT, CHILD PROTECTIVE SERVICES, ETC? _____

HAS A GUARDIANSHIP BEEN ESTABLISHED: YES NO

IF YES, WHEN AND WHERE WERE LETTERS OF GUARDIANSHIP ISSUED:

LIST THE NAMES AND ADDRESSES OF ALL THE MINOR'S GRANDPARENTS, BROTHERS AND SISTERS (full or half siblings):

Name/Relationship

Addresses

DOES THE MINOR OWN ASSETS? YES NO

DOES THE MINOR RECEIVE INCOME? YES NO

IS IT CONTEMPLATED THAT THE MINOR WILL BE INVOLVED IN LITIGATION AND THIS GUARDIANSHIP IS NECESSARY TO PURSUE THOSE CLAIMS (i.e. auto accident, probate)? YES NO

DOCUMENTS:

Make sure to provide the attorney with all relevant documents.

HAVE YOU BROUGHT WITH YOU ALL DOCUMENTS RELATING TO YOUR LEGAL PROBLEM? Birth Certificate for Minor, Driver's License (your's) Social Security Cards, custody orders, guardianship pleadings, etc. YES _____ NO

IF YOU HAVE NOT BROUGHT ALL RELEVANT DOCUMENTS, WHAT OTHER DOCUMENTS EXIST AND WHERE ARE THEY?

<u>DOCUMENTS</u>	<u>LOCATION</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I have read the above document and state that the information provided is true and complete to the best of my knowledge.

(Signature)