




LAW OFFICE OF NATALIA TEPER

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Legal Problem

Wills/Estate Planning/Probate Yes No

Family/Matrimonial Yes No

Immigration/Naturalization Yes No

Municipal Court/Traffic Yes No

Landlord-Tenant Yes No

Other (fill in) _____

Briefly describe your legal issue: _____

How did you hear about our firm? _____

Personal Information:

Name: _____
(Last), (First), (Middle)

Other names: _____ Sex: Male Female
(Maiden, Religious, Professional, Aliases)

Date of birth: _____ Place of birth: _____
(Mo/Day/Yr) (City), (State), (Country)

Address: _____

City: _____ State: _____ Zip: _____ Is your address Confidential? Yes No

Business Phone: _____ Home: _____ Cell: _____

Fax: _____ Email: _____

Marital Status: _____ Social Security Number: _____

Education-Training

School: _____ Degree received: _____ Year of Graduation: _____
(Name of Institution)

Employment

Name of present employer: _____

Address: _____

Position: _____ Salary: _____

Statement of Truthfulness

By signing below, you certify that all of the information contained in this form is true and correct to the best of your knowledge.

I _____, certify that the information provided on this questionnaire is true and correct to the best of my knowledge.

Date: _____
Signature

Submitting this form does not create an attorney-client relationship. Our office does not represent you until we have both signed an agreement and you have paid the retainer.