



Attorney Intake Form

Date: _____

Referring Advocate: _____ Phone: _____

Client(s) Name: _____

Documents Attached:

- Release of Confidential Information for Attorneys (executed by client)
- Contact Information (Smart Office Printout) - Should include as much of the following information as possible:
 - First and Last Name City, State Zip
 - Home & Mobile Phones
 - Email Addresses
 - Date(s) of Birth
 - Marital Status
 - Minor Children (Names and DOB)

Stage 1

Stage 3

Attorney Worksheet

Existing Estate Planning Documents

LW&T _____

POA _____

Trust _____

Other

