

Kathryn Bradfield Lanan

ATTORNEY AT LAW

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Minimum Consultation Fee: \$100.00

**KATHRYN BRADFIELD LANAN
CLIENT INFORMATION - FAMILY LAW MATTER**

Date _____ Referred By _____

Client's Name _____

Address (home) _____

City _____ State _____ Zip _____

Hm# _____ Cell _____

Fax _____ E-Mail _____

Wk# _____ Other _____

Mailing Address (if different): _____

Place of Birth: City _____ County _____ State _____

Age: _____

Race _____ Driver's License No. _____ SSN# _____

Place of Employment _____

Address (work) _____

Telephone (work) _____

Alternate person to contact _____ Phone _____

(Family Member/Friend/etc.)

Opposing Party's Name (if applicable) _____

Address (home) _____ Phone _____

City _____ State _____ Zip _____

Opposing Party's Attorney (if known) _____

CHILDREN

Name _____ Sex _____ Date of Birth _____

Place of Birth _____ County _____ State _____

Social Security No. _____

Present Address _____ City _____ State _____

Name _____ Sex _____ Date of Birth _____

Place of Birth _____ County _____ State _____

Social Security No. _____

Present Address _____ City _____ State _____

What kind of family law matter?

_____ Modification of Custody
_____ Modification of Visitation
_____ Change of Name
_____ Contempt - Child Support
_____ Guardianship

_____ Modification of Child Support
_____ Paternity
_____ Adoption
_____ Contempt - Visitation Violation
_____ Other

(If other) Please specify _____

Is this agreed by all parties? _____ Yes _____ No

Do you need Temporary Orders? _____ Yes _____ No

Do you need a Temporary Restraining Order _____ Yes _____ No

Are the Children covered on Healthcare Insurance? If Yes, with what agency? _____

_____ Harassing & Harming
_____ Removing children from area

_____ Interfering with children
_____ Withdrawing children from school

Do you need a Protective Order?

_____ Assault
_____ Domestic Violence
_____ Harassing & Harming
_____ Removing children from area

_____ Fear of imminent bodily injury
_____ Police Reports?
_____ Interfering with children
_____ Withdrawing children from school

Person to contact _____ Phone _____

FEE AGREEMENT FOR INITIAL CONSULTATION

Because of the increased costs of billing and because of other collection problems, clients who receive professional services at an initial office consultation will be expected to pay for the attorney prior to the appointment. The payment shall be in cash or other secured form. If a personal check is given the client's driver's license number should be included.

The following fees apply to professional services:

One initial office consultation with client, on one or more subjects:

Up to one-half hour	\$100.00
Over one-half hour, up to one hour	\$150.00
Over one hour - attorney's regular hourly rate	\$300.00

All other professional services are billable at the hourly rate of \$300.00. Prior to the attorney and client entering into an agreement for professional services, the attorney will set a minimum retainer fee based on the projected services required to manage the subject matter. The minimum retainer will be used at the rate of \$250.00 per hour. If profession hours exceed, the prepaid services, the client will be billed for additional services at the rate of \$300.00 per hour. The minimum retainer fee is based upon an estimation of time to handle your case and court costs or other expenses incident to the rendering of professional services.

The client will be charged for sums paid to outside sources (i.e., court costs, clerk, sheriff or court reporter fees) and for photocopies of documents, postage expense exceeding a minimum sum, long distance telephone calls, cellular phone costs and other special client expenses. Services of investigators and legal research assistants (other than the attorney) will be billed at the hourly rate charged by those service providers.

Your questions about professional fees are invited. The attorney-client relationship is better served by open discussion of fees. This information has been provided to you so that you will have a pre-interview opportunity to consider financial arrangements.

IT IS UNDERSTOOD AND AGREED THAT THIS FIRM DOES NOT REPRESENT YOU (AND WILL NOT COMMENCE SERVICE ON YOUR BEHALF) UNTIL THE INITIAL RETAINER IS PAID AND THE EMPLOYMENT CONTRACT IS SIGNED.

You must sign this agreement prior to the consultation.

Client's Signature

Date

Client's Signature

Date