

**KING & KING, PLC
NEW MATTER FORM**

Date of Appointment:

Name:

Address:

City:

County:

State:

Zip Code:

Home Telephone Number: (731)

Work Telephone Number:(731)

Cell Number:(731)

Email Address:

Children's Names and Ages:

Type of Legal Matter: Divorce Child Custody Visitation Child Support
(Check all that apply)

Bankruptcy Other:

Name of opposing party:

How did you find King & King, PLC? Please mark all that may apply.

Television
Internet
Telephone Book
Newspaper
Referral (if so, by whom):

By signing below, I acknowledge and understand that I am engaging King & King, PLC for an initial consultation only and that any consultation fee paid is only for the purposes of said initial consultation. I further understand that King & King, PLC reserves the right to decline to represent me in this or any other matter. All of the information contained herein is true and accurate to the best of my knowledge.

SIGNATURE

Has consultation fee been collected: Yes No
Have conflicts been checked: Yes No