

Criminal Intake Information Sheet

Date: _____

Have you utilized our services in the past? _____ How were you referred to our office? _____

First, Middle and Last Name: _____

Mailing Address: _____

City, State and Zip Code: _____

Cell Phone: _____ Alternate Phone: _____

Email: _____

Date of Birth: _____ Are you under the age of 25? YES NO
 Have you taken & completed a Driver's Safety Course (DSC) in the last 12 months? YES NO

Driver's License Number/State: _____

Are you a US Citizen? YES NO
 If No, what is your legal status? _____

Are you currently on Deferred Adjudication/Parole/Probation? YES NO
 If Yes, which City or County? _____

Do you have a Concealed Hand Gun License (CHL)? YES NO

Do you have a Commercial Driver's License (CDL)? YES NO
 If CDL, was offense committed while you were in personal vehicle? YES NO

Date and Time of Offense: _____ Pre-Trial Court Date/Time _____

Violation(s)/Offense(s): _____

Case/Cause/Citation Number(s)? _____

Is case currently in WARRANT? YES NO

Do you wish to accept a plea bargain with the State of Texas? YES NO

Do you wish to contest the charges and set the case for a bench or jury trial? YES NO
 (If you answer "YES" you will need to pay a trial retainer, provide a narrative of events, pay for all witness subpoenas, provide me a list of witnesses and provide color photographs to be used as exhibits during trial.)

Arresting Agency/Police Department: _____

If arrested, provide contact information for the bondsman or person who posted your bond: _____

Retainer Fee (NON-REFUNDABLE): _____

Method of Payment: Cash Check Credit Card
 CC Number/ZipCode/CVV _____