

# Mano, McKerricher & Paroutaud Inc., P.C.

## ATTORNEYS AT LAW

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Attorney \_\_\_\_\_  
File No. \_\_\_\_\_  
Type of Case \_\_\_\_\_  
Consultation Fee Paid \_\_\_\_\_  
Referred By \_\_\_\_\_  
Date \_\_\_\_\_

**Joseph M. Mano, Jr.**  
**John A. McKerricher**  
**Richard A. Paroutaud**  
**Jennifer R. Groberg**  
**Samuel L. Groberg**  
**Bart J. Ricks**

\*\*\*\*\* Please Answer All Questions \*\*\*\*\*

### NEW CLIENT INFORMATION

Client's full name as it appears on driver's license:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(Last) (First) (Middle)

Maiden Name or Alias \_\_\_\_\_

Client's Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Spouse \_\_\_\_\_ Spouse Date of Birth \_\_\_\_\_ Spouse Social Security # \_\_\_\_\_

Mailing / Billing Address

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(Street Address/P.O. Box) (City) (State) (Zip Code)

Telephone: Work \_\_\_\_\_ Home \_\_\_\_\_ Cell # \_\_\_\_\_

Email \_\_\_\_\_

**Names of any and all opposing parties in this matter**

Nearest relative not living with you: Name \_\_\_\_\_ Phone \_\_\_\_\_

Have you ever hired our office for other legal services? \_\_\_\_\_ If so, which attorney? \_\_\_\_\_

How did you hear about us? \_\_\_\_\_