

**THE MCKELLAR LAW FIRM, PLLC**  
**Attorneys and Counselors at Law**  
**603 Main Street, Suite 405**  
**Knoxville, Tennessee 37902**  
**(865) 566-0125**

**Referral Source** \_\_\_\_\_  
**Retainer:** \$ \_\_\_\_\_  
**Flat Fee:** \$ \_\_\_\_\_  
**Hourly Rate:** \$ \_\_\_\_\_

**The information furnished by you on this form is confidential. It has been requested in order to assist the attorney in the handling of your case and will not be released without your consent.**

Client's Full Name: \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_  
Client's Aliases: \_\_\_\_\_;  
Address: \_\_\_\_\_  
Email \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Physical Description: Race \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_  
Hair Color \_\_\_\_\_ Hair Length \_\_\_\_\_ Color of Eyes \_\_\_\_\_ Glasses \_\_\_\_\_  
Build (SM,MD,LRG) \_\_\_\_\_ Tattoos or Scars \_\_\_\_\_  
Birth Defects, Amputations or Disabilities \_\_\_\_\_

Occupation: \_\_\_\_\_ SS # \_\_\_\_\_  
Employment: \_\_\_\_\_ How long employed? \_\_\_\_\_  
Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_ Age \_\_\_\_\_  
Employment: \_\_\_\_\_  
Address \_\_\_\_\_  
Occupation: \_\_\_\_\_ Business Phone \_\_\_\_\_  
Old Client? \_\_\_\_\_ If not, referred by: \_\_\_\_\_  
Address (if known) \_\_\_\_\_

**How did you hear about our law firm?**

\_\_\_\_\_

(1) What offense are you charged with?

\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(2) Who arrested you?

\_\_\_\_\_ When? \_\_\_\_\_  
Where? \_\_\_\_\_  
Where were you taken? \_\_\_\_\_  
When? \_\_\_\_\_ When were you released? \_\_\_\_\_  
What clothing were you wearing at the time of arrest? \_\_\_\_\_  
Were you allowed to phone? \_\_\_\_\_ What Police Department made arrest? \_\_\_\_\_  
What did they tell you? \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(3) What did you say to them?

\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(4) Were you searched? \_\_\_\_\_ Were your surroundings searched? \_\_\_\_\_ If so, give details (etc.)

\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(5) Did you give them a written statement? \_\_\_\_\_ If so, give brief details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(6) Did you sign anything? \_\_\_\_\_ If so, give details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

Did officers advise you that you had the right to remain silent? \_\_\_\_\_ That anything you said might be used against you? \_\_\_\_\_ That you were entitled to have legal counsel present? \_\_\_\_\_ That if you couldn't afford one, the court would appoint one for you? \_\_\_\_\_  
Before or after your statement? \_\_\_\_\_

(7) Were you threatened or abused? \_\_\_\_\_ If so, give brief details \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

Were you placed in a line-up or shown to anyone? \_\_\_\_\_ If so, give details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(8) What do they say you did?  
\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

When? \_\_\_\_\_ With whom? \_\_\_\_\_  
How? \_\_\_\_\_  
Where? \_\_\_\_\_  
What result? \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(9) What are the complete facts? (prior to, at, and after the occurrence)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(10) Others involved?  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Employment \_\_\_\_\_ Address \_\_\_\_\_  
Occupation \_\_\_\_\_ How long employed? \_\_\_\_\_  
Attorney \_\_\_\_\_ Charge filed? \_\_\_\_\_  
If so, give details \_\_\_\_\_  
\_\_\_\_\_  
What part played in event \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

Previous criminal record? \_\_\_\_\_ If so, give details \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Employment \_\_\_\_\_ Address \_\_\_\_\_  
Occupation \_\_\_\_\_ How long employed \_\_\_\_\_  
Attorney \_\_\_\_\_ Charge filed? \_\_\_\_\_  
If so, give details \_\_\_\_\_  
\_\_\_\_\_  
What part played in event \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(11) Have you already had any kind of hearing? \_\_\_\_\_ If so, give details: \_\_\_\_\_

Court \_\_\_\_\_  
Located \_\_\_\_\_  
Case # \_\_\_\_\_ Preliminary hearing: ( ) held, ( ) to be held  
Bond set at \$ \_\_\_\_\_ How made? \_\_\_\_\_  
Attorney \_\_\_\_\_ Trial set for \_\_\_\_\_  
Any continuances? \_\_\_\_\_

(12) What evidence do they have against you?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(13) Do you have evidence? If so, what?

\_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(14) Witnesses who have knowledge of facts

1. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Employment \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
What witness will testify \_\_\_\_\_ ( ) Reverse Side

2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Employment \_\_\_\_\_ Bus. Phone \_\_\_\_\_  
What witness will testify \_\_\_\_\_ ( ) Reverse Side

(15) Marital status

Married? \_\_\_\_\_ Children? \_\_\_\_\_ Living with you? \_\_\_\_\_  
If not, with whom? \_\_\_\_\_  
Address \_\_\_\_\_  
Relationship \_\_\_\_\_ What support are you paying? \$ \_\_\_\_\_ per \_\_\_\_\_  
Status of payment \_\_\_\_\_

(16) Children

|            |           |              |                 |
|------------|-----------|--------------|-----------------|
| Name _____ | Age _____ | Health _____ | Dependent _____ |
| Name _____ | Age _____ | Health _____ | Dependent _____ |
| Name _____ | Age _____ | Health _____ | Dependent _____ |
| Name _____ | Age _____ | Health _____ | Dependent _____ |

(17) Employment record (go back four employments)

Previous Employment \_\_\_\_\_  
Address \_\_\_\_\_  
Dates of Employment \_\_\_\_\_ Occupation \_\_\_\_\_

1. \_\_\_\_\_  
Record \_\_\_\_\_  
2. \_\_\_\_\_  
Record \_\_\_\_\_  
3. \_\_\_\_\_  
Record \_\_\_\_\_

4. \_\_\_\_\_  
Record \_\_\_\_\_

(18) Education

What is the extent of your education? \_\_\_\_\_  
Specialized training \_\_\_\_\_  
Difficulty in reading? \_\_\_\_\_ Writing? \_\_\_\_\_

(19) Military service

\_\_\_\_\_ If so, when did you enter? \_\_\_\_\_  
What branch? \_\_\_\_\_  
When were you discharged? \_\_\_\_\_ What was your rank? \_\_\_\_\_  
Type of discharge \_\_\_\_\_ Summary of Service \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

(20) Church member?

\_\_\_\_\_ If so, which \_\_\_\_\_  
Address \_\_\_\_\_  
Pastor \_\_\_\_\_ How active are you? \_\_\_\_\_  
Would pastor give you a good reference? \_\_\_\_\_

(21) Participation in community affairs? \_\_\_\_\_

\_\_\_\_\_ ( ) Reverse Side

(22) Honors or awards received? \_\_\_\_\_

\_\_\_\_\_ ( ) Reverse Side

(23) Health

What is the condition of your health? \_\_\_\_\_ If less than good, give details, including  
name of doctor, treatment, etc. \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

Are you impaired? \_\_\_\_\_ If so, give extent \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

Sight \_\_\_\_\_ Hearing \_\_\_\_\_ Mental disorders? \_\_\_\_\_  
When? \_\_\_\_\_ Treatment \_\_\_\_\_  
Where? \_\_\_\_\_ By whom? \_\_\_\_\_

Drinking problem? \_\_\_\_\_ If so, give details \_\_\_\_\_

Ever use drugs? \_\_\_\_\_ If so, when? \_\_\_\_\_  
Where? \_\_\_\_\_  
What? \_\_\_\_\_  
Extent \_\_\_\_\_ ( ) Reverse Side

(24) Prior criminal record

Have you ever been arrested before (other than traffic)? \_\_\_\_\_  
Date of Arrest: Charge: Disposition: Sentence (fine):  
Date of Arrest \_\_\_\_\_ Charge \_\_\_\_\_  
Disposition \_\_\_\_\_ Sentence (fine) \_\_\_\_\_

Are you presently on probation or parole? \_\_\_\_\_ If so, give details \_\_\_\_\_  
\_\_\_\_\_ ( ) Reverse Side

Have you ever served time? \_\_\_\_\_ If so, give details (When, where, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_