

Frank B. Watkins

Attorney and Counselor At Law
A Professional Corporation

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CLIENT INFORMATION

Date: _____

File No. _____

(Office use only)

YOUR INFORMATION

Name: _____

REAL ESTATE LAW

Physical Address: _____

Location of the property/address _____

Mailing Address: _____

City, State, Zip: _____

You Need? Circle One: Mortgage Deed Contract

Home Phone: _____

Release of lien/mortgage Promissory Note

Work Phone: _____

Cell Phone: _____

PERSONAL INJURY ACTION

Employer: _____

Date of Injury or Occurrence: _____

Emergency Contact Name: _____

County/State of Injury: _____

Emergency Contact Number: _____

Statute of Limitation: _____

(Attorney use only)

Attorneys previously retained by you for this case:

FAMILY LAW / CIVIL CASES

Referred by: _____

County of Petition/Complaint: _____

Are you a previous client: " Yes " No

Date Served: _____

Date Answer Due: _____

(Attorney use only)

BUSINESS LAW

Name of Business _____

You need? Corporation Dissolution Contract

ADVERSE PARTY INFORMATION

(Other party)

Name: _____

Employer: _____

Address: _____

Employer Address: _____

City, State, Zip: _____

Adverse Counsel: _____

Home Phone: _____

Address: _____

Work Phone: _____

Phone: _____

I understand that unless the attorney and I sign a representation agreement the law firm of Frank B. Watkins does not represent me.

(Signature)