

COWART LAW OFFICES

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INITIAL INTAKE FORM

How did you hear about Cowart Law Office? _____

Date: _____

***ALL FIELDS ON THIS INTAKE FORM ARE REQUIRED**

Purpose of Visit: _____

Legal Name: _____ Maiden Name: _____
Last First Middle

Alias: _____ DOB: _____ M F Ethnicity: _____

Place of birth: _____
City State County

Social Security #: _____ Driver's Lic. #: _____ State: _____

Mailing Address: _____
Street City State Zip Code

Residential Address: _____
Street City State Zip Code

Primary Phone #: _____ Alt. Phone #: _____

Work Phone #: _____ Email Address: _____

Place of Employment: _____ Job title: _____ Annual Salary: \$ _____

Address of Employment: _____
Street City State Zip Code

Spouse's Name: _____ Maiden: _____ DOB: _____
Last First Middle

Address (if different than yours): _____
Street City State Zip Code

PERSON FINANCIALLY RESPONSIBLE:

Name: _____ DOB: _____ Phone Number: _____

Mailing Address: _____

Social Security #: _____ Driver's Lic. #: _____ State: _____

EMERGENCY CONTACT INFORMATION (other than self):

Name: _____ Relationship to you: _____

Address: _____

Primary Phone #: _____ Alt. Phone #: _____ Work Phone #: _____

DISCLOSURE

(EFFECTIVE JANUARY 1, 2025)

DURING YOUR CONSULTATION, THE SPECIFICS OF YOUR CASE WILL BE DISCUSSED AFTER WHICH AN APPROPRIATE RETAINER WILL BE QUOTED BY THE ATTORNEY. **OUR REPRESENTATION OF YOU DOES NOT COMMENCE UNTIL WE HAVE RECEIVED THE QUOTED RETAINER IN FULL, UNLESS OTHERWISE AGREED TO IN ADVANCE.** PLEASE KEEP IN MIND THAT THERE MAY BE TIME SENSITIVE RESPONSES REQUIRED TO INSURE THE BEST POSSIBLE OUTCOME IN YOUR CASE.

QUOTES AND AVAILABILITY FOR REPRESENTATION FOR THE CONSULTED MATTER ARE VALID FOR 30 DAYS FROM THE DATE OF THE INITIAL CONSULTATION.

THE INITIAL RETAINER, WHETHER HOURLY OR FLAT RATE, DOES NOT INCLUDE SERVICE FEES, CERTIFIED COPY FEES, PUBLICATION OR NOTICE FEES, AMICUS/AD LITEM FEES, MEDIATION, DEPOSITIONS, INVESTIGATIVE SERVICES, OR TRIAL UNLESS SPECIFIED AT THE TIME OF YOUR QUOTE. YOUR ATTORNEY WILL DISCUSS THESE MATTERS WITH YOU ON AN "AS-NEEDED" BASIS, AND A SUPPLEMENTAL RETAINER MAY BE REQUIRED.

RETAINERS ARE NON-REFUNDABLE. SHOULD ANY PORTION OF YOUR RETAINER NOT BE USED, THAT PORTION SHALL REMAIN AS A CREDIT ON YOUR ACCOUNT.

HOURLY RATES: CIVIL (CIVIL LITIGATION, FAMILY, AND SOME PROBATE MATTERS) ARE BILLED AT AN HOURLY RATE. LEGAL SERVICES ARE BILLED IN 6 MINUTE INCREMENTS AT THE FOLLOWING STANDARD RATES, EXCEPTING FLAT RATE SERVICES AND ELECTRONIC COMMUNICATIONS DIRECTLY WITH ATTORNEY:

ATTORNEY	\$300.00 PER HOUR
PARALEGAL	\$125.00 PER HOUR
LEGAL ASSISTANT	\$75.00 PER HOUR

CONVENIENCE FEE: THERE WILL BE A 3% CONVENIENCE FEE FOR ALL CREDIT CARD TRANSACTIONS. WE ALSO ACCEPT CASH OR CHECK WITH VALID IDENTIFICATION.

ELECTRONIC COMMUNICATIONS DIRECTLY WITH ATTORNEY ARE BILLED AT \$30.00 PER MESSAGE.

FLAT RATES: CRIMINAL AND SOME PROBATE MATTERS ARE BILLED AT A FLAT RATE.

CONVERSATIONS BETWEEN AN ATTORNEY AND CLIENT ARE PROTECTED BY LAW AND THE DISCIPLINARY RULES TO WHICH ATTORNEYS ARE SUBJECT TO, INCLUDING THE INITIAL CONSULTATION. NO ATTORNEY, NOR ANY EMPLOYEE OF THE ATTORNEY, CAN BE COMPELLED TO REVEAL ANY CONFIDENTIAL COMMUNICATIONS, EXCEPT IN ACCORDANCE WITH SECTION 261.101 OF THE TEXAS FAMILY CODE REGARDING CHILD ABUSE. IF THERE IS CAUSE TO BELIEVE THAT A CHILD HAS BEEN OR WILL BE ABUSED OR NEGLECTED OR THAT A CHILD IS A VICTIM OF AN OFFENSE UNDER 21.11 OF THE TEXAS PENAL CODE, THE ATTORNEY IS REQUIRED BY LAW TO MAKE A REPORT.

SIGNATURE

DATE