

**LAW OFFICES OF CHRISTINA MOLITOR, P.C.**  
**423 E. RAMSEY ROAD**  
**SAN ANTONIO, TEXAS 78216**

**CLIENT INFORMATION**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

HOME PHONE NUMBER: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

MAY WE CALL YOU AT WORK? \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

ADDITIONAL CONTACT INFORMATION: \_\_\_\_\_

NATURE OF CASE: \_\_\_\_\_

OPPOSING ATTORNEY: \_\_\_\_\_

(Notes:) \_\_\_\_\_

HOW DID YOU HEAR ABOUT OUR OFFICE? \_\_\_\_\_

(Lawyer Referral Service, A Friend, Other Advertising)

Our practice is to send invoices to clients at the email address provided on this form. If you prefer to receive your invoice in an alternative manner, please provide the address (email, residential, mailing, etc.) at which you prefer to receive invoices from our office. \_\_\_\_\_

ALTHOUGH WHAT A CLIENT TELLS A LAWYER IS NEARLY ALWAYS CONFIDENTIAL, THERE IS AN EXCEPTION. IN THE EVENT THE LAWYER OR ANYONE ON THE LAWYER'S STAFF HAS GOOD REASON TO BELIEVE THAT A CLIENT HAS COMMITTED CHILD ABUSE, WHETHER THAT INFORMATION IS OBTAINED FROM COMMUNICATIONS WITH THE CLIENT OR OTHERWISE, THE LAWYER OR MEMBER OF THE LAWYER'S STAFF IS REQUIRED BY LAW TO REPORT THE ALLEGED CHILD ABUSE, WHICH THE PERSON HAS GOOD REASON TO BELIEVE HAS OCCURRED, TO THE APPROPRIATE GOVERNMENT AUTHORITIES.

THE INITIAL CONSULTATION FEE IS \$400.00, WHICH IS PAYMENT FOR MEETING WITH CHRISTINA MOLITOR FOR UP TO ONE HOUR. IF THE INITIAL CONSULTATION EXCEEDS ONE HOUR, THE ADDITIONAL TIME WILL BE CHARGED AT HER HOURLY RATE OF \$400.00 PER HOUR.

PLEASE BE ADVISED THAT THE INITIAL CONSULTATION FEE WILL BE COLLECTED PRIOR TO YOUR APPOINTMENT. CHECKS SHOULD BE MADE PAYABLE TO "CHRISTINA MOLITOR, P.C." WE ALSO ACCEPT CASH AND CREDIT CARDS.

I AGREE TO PAY ATTORNEY FEES AS SET FORTH HEREIN.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client Signature