

LAYCOE & BOGDON PC

1112 Daniels Street, Suite 100
Vancouver, WA 98660
(360) 693-1630

Parentage Intake Questionnaire

CLIENT INFORMATION	
Name (first, middle, last):	
Address (street, city, state, zip):	
Home Phone Number:	
Work Phone Number:	
Cell Phone Number:	
E-mail Address:	
Driver's License Number:	
Social Security Number:	
Date and Place of Birth:	
Previous (Maiden) Name:	
Race:	

ADVERSE PARTY INFORMATION	
Name (first, middle, last):	
Address (street, city, state, zip):	
Home Phone Number:	
Work Phone Number:	
Driver's License Number:	
Social Security Number:	
Date and Place of Birth:	
Previous (Maiden) Name:	
Race:	

Representation Not Guaranteed: An initial consultation with the law firm of Laycoe & Bogdon PC does not guarantee that the law firm will accept your case or represent you in your legal matter. If the law firm agrees to represent you, the agreement will be pursuant to a written fee agreement or confirmed by an engagement letter.

CHILDREN FROM RELATIONSHIP WITH ADVERSE PARTY		
Name	Date of Birth / Race	Social Security Number

Describe the history of your involvement and contact with the child(ren) born from this relationship:

CHILDREN FROM OTHER RELATIONSHIPS		
Name	Date of Birth / Age	Resides With

EMPLOYMENT INFORMATION		
	Client	Adverse Party
Employer:		
Address:		
Phone Number:		
Position:		
Rate of Pay:		
Length of Employment:		

Note: Please bring copies of your recent wage stubs and income tax returns for the past two years to your initial consultation.