



JOHN P. RUTKOWSKI
CRIMINAL DEFENSE ATTORNEY

Thank you for contacting my Law Firm. Please fill out the following information and return it by Email @ john@jrhelpinggoodpeople.com or direct fax (866) 397-9055. I am looking forward to serving you.

John P. Rutkowski, Criminal Defense Attorney

CLIENT INFORMATION

DATE: ___/___/___

FIRST NAME MIDDLE NAME LAST NAME

HOME STREET ADDRESS (MAILING ADDRESS) APT#

CITY STATE ZIP COUNTY

DATE OF BIRTH AGE SOCIAL SECURITY # U.S. CITIZEN YES NO

HOME PHONE# CELL PHONE # DAYTIME PHONE # FAX #

EMAIL ADDRESS

YOUR OCCUPATION NAME OF EMPLOYER

WORK ADDRESS WORK #

GROSS MONTHLY INCOME:

SPOUSE/OTHER INFORMATION

FIRST NAME MIDDLE NAME LAST NAME

HOME STREET ADDRESS (MAILING ADDRESS) APT#

CITY STATE ZIP COUNTY

DATE OF BIRTH AGE SOCIAL SECURITY # U.S. CITIZEN YES NO

HOME PHONE# CELL PHONE # DAYTIME PHONE # FAX #

EMAIL ADDRESS

EMERGENCY CONTACT

CONTACT PERSON RELATIONSHIP PHONE #

CHILDREN

NAME	DATE OF BIRTH	AGE	LIVING WITH
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NAME	DATE OF BIRTH	AGE	LIVING WITH
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NAME	DATE OF BIRTH	AGE	LIVING WITH
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CURRENT CHARGES

PRIOR CRIMINAL HISTORY (IF ANY)

OFFENSE	COUNTY/COURT	MONTH/YEAR	DISPOSITION
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OFFENSE	COUNTY/COURT	MONTH/YEAR	DISPOSITION
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OFFENSE	COUNTY/COURT	MONTH/YEAR	DISPOSITION
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OFFENSE	COUNTY/COURT	MONTH/YEAR	DISPOSITION
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INFORMATION IN DUI CASE RETROGRADE EXTRAPOLATION

TIME STARTED DRINKING: _____

TIME STOPPED DRINKING: _____

TYPE AND AMOUNT OF ALCOHOL CONSUMED: _____

DID YOU EAT PRIOR TO CONSUMING ALCOHOL? _____

WHAT TIME DID YOU LAST EAT AND WHAT DID YOU EAT? _____

HOW MUCH DO YOU WEIGH? _____

WHERE WERE YOU COMING FROM/GOING TO? _____
