

Philadelphia Bar Association
Low Fee Plan
Client Intake Form

Client Name: _____

Address: _____

Phone: _____

Referral Agency _____

Agency Phone: _____

Name of Referral Attorney/Paralegal: _____

Check the area in which the client is seeking legal representation. Please be sure to advise the client that all charges are exclusive of costs and reasonable expenses, which are the his/her sole responsibility.

- | | |
|--|--|
| <input type="checkbox"/> Uncontested Divorce (LF01) \$250 | <input type="checkbox"/> Bankruptcy (Chapter 7)(LF09) \$600 |
| <input type="checkbox"/> Uncontested Divorce (LF02) \$300
(With stipulation as to custody/visitation of children) | <input type="checkbox"/> Simple Will (LF10) \$50 |
| <input type="checkbox"/> Spousal Support (LF03) \$200
(Conference) | <input type="checkbox"/> Living Will (LF11) \$25 |
| <input type="checkbox"/> Spousal Support (Hearing)(LF04) \$250 | <input type="checkbox"/> Power of Attorney (LF12) \$25 |
| <input type="checkbox"/> Child Support (Conference)(LF05) \$200 | <input type="checkbox"/> Guardianship (LF13) \$300 |
| <input type="checkbox"/> Child Support (Hearing)(LF06) \$250 | <input type="checkbox"/> Deed Transfer (LF23) \$50 |
| <input type="checkbox"/> Spouse/Domestic Abuse (LF07) \$250 | <input type="checkbox"/> Administration of Small Estates
(Less than \$15,000)(LF14) \$500 |
| <input type="checkbox"/> Name Change (LF08) \$250 | <input type="checkbox"/> Administration of Small Estates
(More than \$15,000)(LF15) \$1,000 |
| <input type="checkbox"/> Unemployment Compensation (LF16) \$200 | |

HOURLY FEE CASES

(Performed at a rate of no more than \$50.00 per hour)

- | | |
|--|---|
| <input type="checkbox"/> Negligence Defense (LF17) | <input type="checkbox"/> Creditor/Debtor (LF18) |
| <input type="checkbox"/> Consumer (LF19) | <input type="checkbox"/> Small Claims Court (Hearing)(LF20) |
| <input type="checkbox"/> Landlord/Tenant (LF21) | <input type="checkbox"/> Eviction (Hearing)(LF22) |

☞ Please attach the client's income eligibility data. A referral will not be made without this information.