

**LAW OFFICES OF A. ERWIN BAUTISTA**  
**dba AMERICAN LEGAL CENTER**

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( ) PHILIPPINES OFFICE  
L/O Andres, Padernal, Paras  
111 HV Dela Costa Street, 8<sup>th</sup> Flr.  
Sagittarius Bldg., Salcedo Village  
MAKATI CITY, PHILIPPINES  
Tel. No. 0998 - 737 - 8555

**CONSULTATION INFORMATION SHEET**

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

CONSULTATION FEE: \_\_\_\_\_

<b>NAME:</b> _____ <b>EMAIL ADD:</b> _____ <i>(Last Name, First Name, Middle)</i>	
<b>PLACE OF BIRTH:</b> _____	<b>DATE OF BIRTH:</b> _____
<b>CITIZENSHIP:</b> _____	<b>ALIEN #:</b> _____ ( ) Immigrant ( ) Non-immigrant

<b>MARITAL STATUS:</b> M ( ) S ( ) D ( ) W ( ) <b>GENDER:</b> (M/F) _____ <b>No. of Children (below 21)</b> _____	
<b>Name of Spouse/Relative/Friend:</b> _____ <b>EMAIL ADD:</b> _____ <i>(Last Name, First Name, Middle)</i>	
<b>PLACE OF BIRTH:</b> _____	<b>SSN:</b> _____
<b>DATE OF BIRTH:</b> _____	
<b>CITIZENSHIP:</b> _____	<b>ALIEN #:</b> _____ ( ) Immigrant ( ) Non-immigrant

<b>PRESENT ADDRESS:</b> _____ Street Apt. #, if any _____ City State Zip Code	<b>CONTACT INFORMATION:</b> <b>Cellphone:</b> _____ <b>Home:</b> _____ <b>Office:</b> _____ <b>Fax:</b> _____
<b>FOREIGN ADDRESS:</b> _____	

<b>OCCUPATION/PRESENT JOB:</b> _____	<b>NATURE OF WORK/BUSINESS:</b> _____
<b>NAME OF EMPLOYER:</b> _____	
<b>ADDRESS:</b> _____	<b>Tel. No.:</b> _____
_____	<b>Fax No.:</b> _____

<b>AREA OF CONCERN:</b>		
( ) Bankruptcy	( ) Personal Injury	( ) Income Tax
( ) Immigration	( ) Divorce	( ) Workers Compensation
( ) Criminal Case	( ) Civil Litigation	( ) Other: _____

<b>REFERRAL SOURCE</b>		
( ) Walk-in	( ) Mabuhay	( ) Individual's Name: _____
( ) Asian Journal	( ) Internet	
( ) Yellow Pages	___ Google ___ Other: _____	