



LAKESIDE LAW OFFICES, LLC.

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Thank you for choosing Lakeside Law Offices, we look forward to providing for all your legal needs. The following is our new client form. Please fill it out to the best of your ability. All information is kept in your secure, confidential client file. The information supplied in this form helps us create an accurate client record and to check for any conflicts of interest.

If you have any questions regarding any aspect of this form, please contact our office at 414-716-6380 to speak with an attorney.

Client Information:

Name: _____

Address: _____

Social Security No.: _____

Birthdate: _____

Occupation: _____

Employer: _____

Client's Home Telephone No.: _____

Client's Work Telephone No.: _____

Email Address: _____

Spouses Information:

Name: _____

