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RETAINER DATA
DOMESTIC VIOLENCE CRIMINAL CHARGES

PLEASE PRINT LEGIBLY AND IN BLACK INK
PLEASE PHOTOCOPY ALL TICKETS OR CHARGING AND OTHER DOCUMENTS TO OBTAIN THE CLEAREST COPY
THEN FAX OR MAIL WITH THIS DATA SHEET

FOR ALL NAMES - PROVIDE LEGAL NAME - FIRST, MIDDLE, LAST + ANY SUFFIX - ie: Jr. or III

Court Case No.: _____ Unknown Division: _____ County: _____

CLIENT	ALLEGED VICTIM
Full Name _____	Full Name _____
Street Address _____	Street Address _____
PO Box Address _____	PO Box Address _____
City, State ZIP _____	City, State ZIP _____
Date of Birth _____	Date of Birth _____
Social Security _____	Social Security _____
DL No. _____	DL No. _____
DL State Issued _____	DL State Issued _____
DL Expiration Date _____	DL Expiration Date _____
Phone - Home _____	Phone - Home _____
Phone - Cell _____	Phone - Cell _____
Phone - Message _____	Phone - Message _____
Phone - Work _____	Phone - Work _____
Phone - Fax _____	Phone - Fax _____
Email Address _____	Email Address _____
Employer Name _____	Employer Name _____
Employer Street _____	Employer Street _____
Employer PO Box _____	Employer PO Box _____
Employer City, State _____	Employer City, State _____
Title - Job Description _____	Title - Job Description _____

OFFICE USE ONLY - NOT FOR PROSPECTIVE CLIENT SUBMISSION

Charge Card: MasterCard VISA Account No. _____
 American Express Discover Expiration Date: _____ PIN: _____
Trial Flat Fee: \$ _____ Costs Estimate: \$ _____ Initial Payment: \$ _____ Settlement Flat Fee: \$ _____

DATE: _____, 20____

PROSPECTIVE CLIENT'S SIGNATURE

PROSPECTIVE CLIENT LAST NAME

CASE INFORMATION

Date of Offense _____

Location Offense _____

County El Paso Teller Other _____

Date of Stop / Arrest _____

Location Stop / Arrest _____

County El Paso Teller Other _____

Summons Number 1 _____

Charges _____

Summons Number 2 _____

Charges _____

Summons Number 3 _____

Charges _____

Summons Number 4 _____

Charges _____

Accident Report No. _____

Offense Report No. _____

Law Enforcement Agency

Colorado Springs PD El Paso SO Teller SO

Colorado State Patrol Manitou Springs PD

Fountain PD Palmer Lake Marshall Monument PD

Cripple Creek PD Woodland Park PD Other: _____

CASE INFORMATION

Number Prior Arrests DV Charges _____

Date(s) of Arrest(s), Charges & Location(s)

Number Prior Convictions DV Charges _____

Date(s) of Conviction(s), Charges & Location(s)

Pending Domestic Violence Criminal Court Case

Court Division _____

Courtroom No. _____

Floor _____

County El Paso Teller _____

First Appearance Date _____

First Appearance Time _____

Next Court Date _____

Next Court Time _____

Proceeding First Appearance / Advisement

Pre-Trial Conference Motion Hearing Trial Readiness

Court Trial Jury Trial

PRO Injunction Proceedings

Court Case No. _____

Dates: Filed: _____ Served: _____

Hearing Date: _____

Representation Desired: Yes No

PROSPECTIVE CLIENT LAST NAME

CO-MAKER No. 1

Relation to Client Father Mother Sibling
 Grandparent Friend Other

Full Name _____

Street Address _____

PO Box Address _____

City, State ZIP _____

Date of Birth _____

Social Security _____

DL No. _____

DL State Issued _____

DL Expiration Date _____

Phone - Home _____

Phone - Cell _____

Phone - Message _____

Phone - Work _____

Phone - Fax _____

Email Address _____

Employer Name _____

Employer Street _____

Employer PO Box _____

Employer City, State _____

Title - Job Description _____

CO-MAKER No. 2

Relation to Client Father Mother Sibling
 Grandparent Friend Other

Full Name _____

Street Address _____

PO Box Address _____

City, State ZIP _____

Date of Birth _____

Social Security _____

DL No. _____

DL State Issued _____

DL Expiration Date _____

Phone - Home _____

Phone - Cell _____

Phone - Message _____

Phone - Work _____

Phone - Fax _____

Email Address _____

Employer Name _____

Employer Street _____

Employer PO Box _____

Employer City, State _____

Title - Job Description _____