

DUI INFORMATION / EVALUATION FORM

This form can be filled in by using your computer if you have adobe installed. Either download the form and fill in the requested information or print it out from your web browser and handwrite your answers. To properly defend you, the following information can many times be extremely important. Fill out the form and bring it to my office or email it back to me. ALL COMMUNICATION IS STRICTLY CONFIDENTIAL.

Name:	ADDRESS:	
Phone #	Social Security Number:	
Date of Arrest:	Location:	
LICENSE # & STATE	CAR TAG # & STATE	
Has your driver's license bee	en suspended?	
Were you involved in an acc	ident prior to being charged and arrested for DUI?	
In who's name was the auto	mobile registered:	
Did you submit to any breat	h-test after being taken to the jail?	
If YES, do you know the test	results?	
Did you submit to any field s	sobriety tests (i.e. touch your nose, walking, etc)?	
Do you know if you were be	ing filmed at any time during or after you arrest?	
Was there any alcohol in the	e automobile found by the officer?	
Have you been convicted of	a DUI before?	
If Yes, please provide the co	urt of conviction and approximate dates	
Do you have any prior convi	ctions of any other criminal charges?	

If yes, please list all prior convictions:		
Please provide details about your DUI arrest:		
Employer:		
Where did you learn about my law practice:		
Please provide any other information you think is important:		
		