

Solicitors At Law 1st Floor, No. 5 Hillside Bye Pass Road, Off Pademba Road, Freetown, Sierra Leone

Telephone: +23276600394 +23278595918

Re: Your Consultation Request

Dear Potential Client:

Thank you for contacting Tanner Legal Advisory regarding your search for any solicitors. As part of your interest in retaining an attorney, we will need to review pertinent documents and discuss your objectives and legal options as well as whether we will be able to represent you in these matters. If we are unable to assist you with your case, we will notify you promptly.

Attached, please find a Consultation Form. The Consultation Form will assist us in evaluating your case and any representation decisions. Please complete the Consultation Form and fax or e-mail it back to our office with copies of any documents that you believe will be helpful to our review of your case.

Email: info@tannerlegalavisory.com

Please contact our office when you are ready to set up the initial consultation appointment. If Tanner Legal Advisory is retained for advice and counsel or full representation after the initial consultation, we will require additional items including but not limited to 1) an attorney-client fee agreement, and 2) a refundable retainer deposit.

If additional information is required, please feel free to contact our office at +23276600394/+23278595918

Sincerely,

Support Services

Tanner Legal Advisory



Consultation Form

Use and submission of this Consultation Form through our website, www.tannerlegaladvisory.com is provided as a convenience in communicating with Tanner Legal Advisory. Please note that users of our web site, including those who send us electronic mail, do not enter into an attorney-client relationship with The McGary Firm, unless we separately and expressly confirm such a relationship and a client retainer agreement is fully executed. We do not seek to represent anyone based solely on a visit to our web site. Sending electronic mail to us is not necessarily a secure or confidential means of communication. If you have concerns about this, please contact our office line.

First Name:	LastName:	DOB:
Business Name:	Address:	
City:	State:	Zip:
Home Telephone:	Fax:	E-mail:
Employer:	Em	ployer Telephone:
PLEASE PROVIDE A BRIEF DESCRIPT	TION OF YOUR CASE:	
Served with papers:	When:Court Da	te:Judge:
Names of Associated and/or Rela	ated Parties:	
Other Side's Name:		
ADDITIONALINFORMATION:		
Spouse:	Spouse's Employer:	Phone:
Referred By:		
		efore? Who? (please provide name, address, and phone number)
Do you have or have you spoker	to an attorney in this matter? Who?	(please provide name, address, and phone number)
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Thank you for taking the time to fill out our form!