

Tickler Checklist
 (**Keep on top of file**)

Client:	Case opened:
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Initial Intake Checklist completed and copy given to client on:

Revised date:						
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Materials Given to Client	Date
Unbundling Description	
Brochure	
Referral Information	
Directions to Court	
Family Court Services	
Facilitator	
DCSS	
Other	

Worksheet regarding scope of services and services NOT performed _____ Modified and signed by attorney and client (new form for each change in scope)

Dated:						
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Notice of Limited Scope Representation served and filed (if going on record)

Documents in Hand Signed by Client	Date	Modified on
Intake Checklist		
Issues to be Apportioned		
Tasks to be Apportioned		
Retainer Agreement No.		
Other:		
Other:		
Other:		

Case Conclusion

Closing Letter Sent:

Substitution of Attorney Sent to Client _____ (date), Signed by Client _____ (date), Filed _____ (date).

Application to be Relieved as Counsel Served and Filed _____. Order Granting Application Filed _____.

Case Closed:

Other Comments: