

# CRIMINAL FILE INFORMATION SHEET

## Client and Case Information

Name: \_\_\_\_\_

(aka): \_\_\_\_\_

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_ SEX: \_\_\_\_\_ Race: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: Work: \_\_\_\_\_ Home: \_\_\_\_\_ Pager: \_\_\_\_\_

- Court Appointed       Retained  
 Letter to Court and DA re representation

Motion for Release: \_\_\_\_\_ Hearing Date: \_\_\_\_\_

Custody:     Yes  No

Location: \_\_\_\_\_

Bail:    Yes  No      Amount:    \$ \_\_\_\_\_

Date Arraigned: \_\_\_\_\_

Preliminary Hearing Date: \_\_\_\_\_

Plea Date: \_\_\_\_\_

Arresting Officer: \_\_\_\_\_

Police Agency: \_\_\_\_\_

Request release hearing, review statute for criteria.       Completed    N/A

If custody, is hearing set within statutory time period?       Completed    N/A

    Trial within 60 days       Completed    N/A

    P/V within 14 days       Completed    N/A

Call Date: \_\_\_\_\_

    Client Notified of Call Date       Completed    N/A

Trial Date: \_\_\_\_\_

    Client Notified of Trial Date       Completed    N/A

Sentence: \_\_\_\_\_

Notice of Appeal Due Date: \_\_\_\_\_

Expungement Date: \_\_\_\_\_

## CRIMINAL CASE CHECKLIST

### Charge Information

Charges: \_\_\_\_\_  
Case Number: \_\_\_\_\_ Court: \_\_\_\_\_  
DA: \_\_\_\_\_ Phone: \_\_\_\_\_

### Court Dates and Calendaring

Notice the Court DA of representation.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Calendar all court dates.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Calculate and calendar any required for notices of defenses, motions, etc.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Review local rules for custom and practice on whether client needs to be at all appearances.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A

### Case Work-Up

Charging Instrument reviewed against statute.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
DUII review for Diversion Eligibility <input type="checkbox"/> DUII B calendar 30 days from arraignment for filing	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
DUII review for 10-day time period request DMV Hearing or Suspension	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Discovery requested	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Motion to compel	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Review case law for constitutionality of charge (demur)	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Review charge for maximum sentence <input type="checkbox"/> If felony, determine applicable grid block.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Measure 11 B OCDLA contact made.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Misdemeanor level.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A

### Case Preparation

Interview client	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Notice affirmative defenses	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Request records or document investigation from defense interview (school records, hospital records, etc.)	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Review police reports and other discovery.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Interview state's witness (need victims letter).	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Interview defense witness.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Gather and preserve evidence (diagrams, photos, etc.)	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Reciprocal discovery.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Motion to Suppress Evidence.	<input type="checkbox"/> Completed <input type="checkbox"/> N/A
Subpoenaed	<input type="checkbox"/> Completed <input type="checkbox"/> N/A

## CRIMINAL CASE CHECKLIST

### Witnesses

Name	Address	Telephone	Interviewed	Subpoenaed

Investigator: \_\_\_\_\_

Telephone: \_\_\_\_\_

### Alternative Disposition

- |  |   |
|--|---|
| Non-trial disposition <b>B</b> contact DA for a pre-trial offer,<br>Review court rules for docketing a plea. | <input type="checkbox"/> Completed <input type="checkbox"/> N/A |
| Consider Civil Compromise.   | <input type="checkbox"/> Completed <input type="checkbox"/> N/A |
| Consider various County DA Domestic Violence<br>Diversion programs.  | <input type="checkbox"/> Completed <input type="checkbox"/> N/A |
| Consider Drug Diversion (Multnomah County <b>A</b> Stop@).   | <input type="checkbox"/> Completed <input type="checkbox"/> N/A |

### Sentencing Issues

- |   |   |
|---|---|
| Review evidence of mitigation.  | <input type="checkbox"/> Completed <input type="checkbox"/> N/A |
| Review evidence to contradict, state's evidence<br>of aggravation   | <input type="checkbox"/> Completed <input type="checkbox"/> N/A |
| Prepare client for right of allocution, if client wishes to<br>address court.   | <input type="checkbox"/> Completed <input type="checkbox"/> N/A |
| Review sentencing Order (Judgement) to make sure it<br>reflects what the Judge said.  | <input type="checkbox"/> Completed <input type="checkbox"/> N/A |
| Closing letter to client discussing right to appeal, sentence<br>and condition of probation, address for payment of fines,<br>questions to probation judge, expungement date. | <input type="checkbox"/> Completed <input type="checkbox"/> N/A |