

**LEGAL SERVICES OF SOUTHERN PIEDMONT
VOLUNTEER LAWYERS PROGRAM**

INITIAL CASE DISPOSITION SHEET

ATTORNEY:

CASE NUMBER:

CLIENT:

_____ I interviewed the applicant and will provide representation.

Anticipated Case Completion Date: _____

Anticipated Attorney Hours Needed: _____

_____ I interviewed applicant and will not provide representation because:

_____ Applicant did not contact this office.

VLP Attorney Signature

Firm Name

Date

PLEASE COMPLETE AND RETURN THIS FORM TO:

Kamilah Exum
Legal Services of Southern Piedmont, Inc.
1431 Elizabeth Avenue
Charlotte, NC 28204
704-971-2579