

**CONFIDENTIAL**

Q|Nav, LLC Client Intake Data Register



Name \_\_\_\_\_, DOC/BOP \_\_\_\_\_

Facility Name, Address \_\_\_\_\_

Your case number(s) \_\_\_\_\_

State and county, or fed district \_\_\_\_\_

Your lawyer, primary advocate(s) \_\_\_\_\_

Your primary family, loved one point person(s) names, contact information \_\_\_\_\_

Describe nature of your case, charges, convictions sentencing scheme, etc. [add paper] \_\_\_\_\_

Tell us your goals and objectives [add paper] \_\_\_\_\_

Please sign and date below this brief ROI so we can get some records and talk with your lawyer(s)

**Release of Information**

I, \_\_\_\_\_ hereby authorize Will Hoover and Q|Nav associates to speak with my trial, direct appeal and postconviction appellate counsel as well as any other person to discover professional knowledge, insight and facts related to my criminal defense, case number \_\_\_\_\_. I further release and instruct to promptly provide whatever files, records, discovery – any records received from trial and appellate counsel(s), and to speak freely with Mr. Hoover and his associates. I hereby waive the attorney – client privilege. Please accept my authorization and permission for phone conversations, virtual or in person meetings, and/or to send documents, notes, and records to Mr. Hoover or his entity representatives, as he or they request, either electronically or hard copy. Thank you for your assistance and cooperation.

This Release of Information is limited to the above party only. No other authorization is given. .A photocopy of this ROI will act sufficiently as an original document.

Sincerely,) (signature) \_\_\_\_\_ ID# \_\_\_\_\_

Comments \_\_\_\_\_