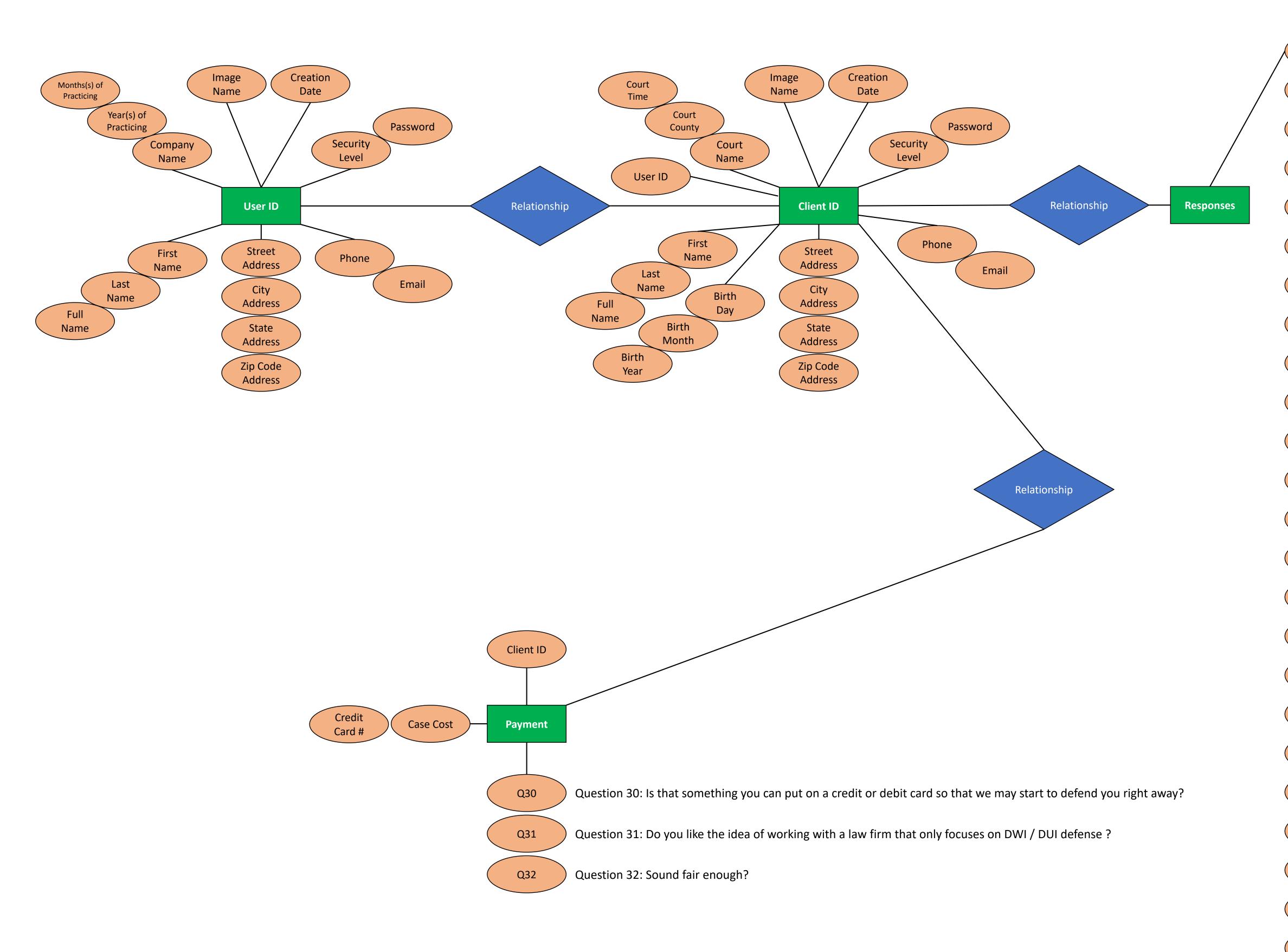
Legal Lead Closer

Entity Relationship (ER) Diagram



LEGEND	
User ID	ENTITY
Zip Code Address	ATTRIBUTE
	CONNECTION
Relationship	RELATIONSHIP

Client ID	
Q1	Question 1: Why were you stopped by the police? Or how did they engage you?
Q2	Question 2: Were you involved in an accident?
Q3	Question 3: Did you hit another vehicle?
Q4	Question 4: Were they injured and if so to what extent?
Q5	Question 5: Tell me about your accident?
Q6	Question 6: Were you medically evaluated and if so by whom?
Q7	Question 7: What did they say to you when the officer approached your vehicle?
Q8	Question 8: Did you make any statements to the officer?
Q9	Question 9: If yes, what did you say?
Q10	Question 10: Did you tell the officer how much you have been drinking or what drugs you may have been on?
Q11	Question 11: Did he make you step out of the vehicle?
Q12	Question 12: Did you have to do any Field Sobriety Tests?
Q13	Question 13: If so, which ones? (a drop down of, Horizontal gaze nystagmus/ One leg stand/ Walk and turn/ Romberg balance/ Alphabet recital/ Finger to nose/ Finger count/ Other
Q14	Question 14: Did you take a breathalyzer at the scene?
Q15	Question 15: Were you handcuffed at that point?
Q16	Question 16: Did the officer read you the Miranda warnings?
Q17	Question 17: Were you taken to the police station?
Q18	Question 18: Did they put you in a cell or handcuff you to a bench?
Q19	Question 19: Did you take the chemical test (breathalyzer) at the station?
Q20	Question 20: If yes- Was it a breath test or a blood test?
Q21	Question 21: What was your BAC?
Q22	Question 22: Was your vehicle impounded or towed?
Q23	Question 23: If yes have you recovered it yet?
Q24	Question 24: What do you do for a living?
Q25	Question 25: Is this something that could affect you professionally?
Q26	Question 26: If yes- How so? (note to lawyer, have them express to you what they may have to lose)
Q27	Question 27: Do you have a family member or members that rely on your income
Q28	Question 28: If yes- How do you think this will affect them?

Question 29: What is your biggest concern or fear facing this charge? (Drop down

box of the following: Prison/Jail, loss of license, loss of job, costs associated with

legal fees and fines, criminal record, other)