

# REED & ELMQUIST, P.C.

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## CLIENT INFORMATION SHEET

Date of Meeting: \_\_\_\_\_

\_\_\_\_\_  
First Name Middle Name Last Name SS# \_\_\_\_\_

\_\_\_\_\_  
Spouse's First Name Middle Name Last Name SS# \_\_\_\_\_

\_\_\_\_\_  
Street Address City State Zip County

\_\_\_\_\_  
E-Mail Address Best Phone Number

\_\_\_\_\_  
Your Occupation How Long Spouse's Occupation How Long

How did you hear about the services offered by this office? \_\_\_\_\_

Briefly, what caused your current financial problems?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**In this form, the term "you," refers to both you and your spouse, if any.**

**Bring to your appointment the two most recent IRS tax returns, and at least two paystubs.**

ENTER **YES** or **NO** TO EACH OF THE BELOW QUESTIONS. There is no right or wrong answer.

	Have you lived outside of Texas within the last 2 years?
	Do you have any dependents that you support? How many: _____ Ages: _____
	Do you owe, or pay, any child support or alimony? (are you behind in payments: _____)
	Have you sold, given away, or traded any real or personal property in the last two years?
	Is there anyone who has or could sue you?
	Do you have any lawsuits pending? (divorce & child custody cases included)
	Is there anyone you could sue?

Client Information Sheet Atty: Present: DL: SS: \_\_\_\_\_

	Does anyone owe you money?
	Do you have any claim for personal injury, auto accident, class action, or medical malpractice you could make?
	Are you the beneficiary of an estate, trust, or any pending probate?
	Is there any property that you own but you do not have possession of?
	Do you owe any money to family or friends?
	Within the past 90 days have you made any purchases or cash advances on a single credit card over \$500?
	Within the past 90 days have you made any credit card cash advances, or written any convenience checks, against a credit card account?
	Do you own any kind of asset or property other than your home, its contents, vehicles, and retirement accounts? List here:
	In the last year have you cashed out or withdrawn any money from a retirement account?
	In the last year have you received financial assistance from any person, agency, or business?
	Do you owe any money to the bank where you have your checking or savings account?
	Have you made payments on your home in excess of the normal payments in the past 10 years?
	Have you been accused of fraud by any creditor?
	Have you ever caused any personal injury while operating a motor vehicle or vessel?
	Have you ever been arrested for causing any personal injury while under the influence of alcohol or controlled substances?
	Did you own any interest in a business or farm within the last year? (Self employment included)
	Do you own any rental property? Address:
	Have you received interest, dividends, or royalty income in the last six months?
	Have you received any income other than wages in the last six months?
	Are there any income tax returns that you have not filed? Years:
	Do you provide support to anyone outside your home?
	Do you have any retirement loans? Balance:
	Do you have any court ordered deductions from your pay check?
	Are you, or your spouse retired, or eligible for retirement income of any kind?

### Questions regarding your debts:

**Home Mortgage** How much do you owe? \$ \_\_\_\_\_ When did you buy it? \_\_\_\_\_  
 Are you behind? \_\_\_\_\_ How many months behind? \_\_\_\_\_ Property Occupied? \_\_\_\_\_  
 How many acres? \_\_\_\_\_ Payment amount \$ \_\_\_\_\_ Approximate sale value \$ \_\_\_\_\_  
 Is your home posted for foreclosure? \_\_\_\_\_ Does your payment include escrow? \_\_\_\_\_  
 Is the home a mobile home? \_\_\_\_\_ Do you wish to keep the property? \_\_\_\_\_  
**Second mortgage:** \$ \_\_\_\_\_ Purpose: \_\_\_\_\_

**Vehicle #1:** Make: \_\_\_\_\_ Model: \_\_\_\_\_ Payoff \$ \_\_\_\_\_  
 Monthly Payment: \$ \_\_\_\_\_ Are you behind? \_\_\_\_\_ Month & Year of Purchase \_\_\_\_\_



**SELF-EMPLOYED or BUSINESS QUESTIONS** *Complete only if operating now.*

**This section is only for self-employed individuals, and those that do not receive regular wages. Complete a separate sheet for each business. You MUST disclose all businesses that you are involved with. We will need a copy of the Profit & Loss Statement and Balance Sheet, for each of the preceding 12 months.**

**Type of legal entity (circle one):** Professional Association    General Partnership    Corporation  
Sole Proprietorship                      d/b/a    LLC                      PC                      Limited Partnership

Name of Legal Entity/Business: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Tax ID \_\_\_\_\_

Do you **rent** or **own** the location? \_\_\_\_\_ If you rent is there a lease? \_\_\_\_\_ Are you current: \_\_\_\_\_

What is the cost of your current inventory? \$ \_\_\_\_\_ Value of your equipment? \$ \_\_\_\_\_

What is the current balance of your collectable accounts receivable? \$ \_\_\_\_\_

Do you receive:    Commissions? Yes No    Rental Income? Yes No    Bonus? Yes No

Number of employees full time: \_\_\_\_\_ part time: \_\_\_\_\_ contract laborers: \_\_\_\_\_

Do you use trade credit in the operation of your business that you do not pay off each month? Yes No

List the total amount of trade credit: \$ \_\_\_\_\_ What is the balance of other payables? \$ \_\_\_\_\_

Do you sell or serve liquor/beer? Yes No    Do you have environmental issues pending? Yes No

Is there a lien on the business furniture/fixtures/equipment or inventory? Yes No

Do you have any business tax debt? Yes No    If yes, attach a statement for each tax due.

Do you intend to keep the business running? \_\_\_\_\_

Comments for the attorney about the business:

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