

REED & ELMQUIST, P.C.

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CLIENT INFORMATION SHEET

Date of Meeting: _____

 SS# _____
 First Name Full Middle Name Last Name

 SS# _____
 Spouse's First Name Full Middle Name Last Name

 Street Address City County How long at address?

 E-Mail Address Best Phone Number

 Your Occupation Employer How Long?

 Spouse's Occupation Employer How Long?

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

Briefly, what caused your current financial issues?

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	In the last year have you cashed out or withdrawn any money from a retirement account?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: Year: _____ Make: _____ Model: _____ Payoff \$ _____
Monthly Payment: \$ _____ Are you behind? _____ Month & Year of Purchase _____

Vehicle #2: Year: _____ Make: _____ Model: _____ Payoff \$ _____
Monthly Payment: \$ _____ Are you behind? _____ Month & Year of Purchase _____

Do you have any creditors whose claims are secured by collateral such as furniture, appliances, jewelry, boat, pool, stocks, bonds, recreational vehicle, etc.? YES or NO

Creditor: _____ Collateral: _____ Balance: \$ _____
Creditor: _____ Collateral: _____ Balance: \$ _____

Taxes owed:

	Type of Tax	Year / Quarter	Amount
IRS			\$
IRS			\$
State			\$
County			\$

APPROXIMATE AMOUNT OF OTHER DEBTS:

Credit Cards: \$ _____ Student Loans: \$ _____
Judgments: \$ _____ Medical bills: \$ _____
Signature loans: \$ _____ Loans from Friends & Family: \$ _____
ANY other debts or claims against you: _____

Attorney notes:

Payment terms:

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 the past calendar year and current year to date.

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:
