

**CLIENT QUESTIONNAIRE**  
**PLEASE ANSWER ALL QUESTIONS, PRINTING CLEARLY**

**SECTION 1: BASIC INFORMATION**

**CLIENT INFORMATION**

(circle one)

Mr. / Mrs./ Ms. First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Other Names (ex: maiden name, nickname, Jr. / Sr., etc.): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Physical Address: \_\_\_\_\_ Mailing Address (if different from physical address): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ \_\_\_\_\_

Employer: \_\_\_\_\_ Do you have any other income? (ex: Social Security, Disability,

How Long Employed: \_\_\_\_\_ Part-time job, Alimony, child support, family / friend, etc.)

Position: \_\_\_\_\_ Source: \_\_\_\_\_

Monthly Income: \_\_\_\_\_ Monthly amount: \_\_\_\_\_

**SPOUSE'S INFORMATION (If Filing Together)**

(circle one)

Mr. / Mrs./ Ms. First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Other Names (ex: maiden name, nickname, Jr. / Sr., etc.): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Physical Address: \_\_\_\_\_ Mailing Address (if different from physical address): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_ \_\_\_\_\_

Employer: \_\_\_\_\_ Do you have any other income? (ex: Social Security, Disability,

How Long Employed: \_\_\_\_\_ Part-time job, Alimony, child support, family / friend, etc.)

Position: \_\_\_\_\_ Source: \_\_\_\_\_

Monthly Income: \_\_\_\_\_ Monthly amount: \_\_\_\_\_

How did you hear about us? (Please check one)

Individual: \_\_\_\_\_ Attorney: \_\_\_\_\_ Internet: \_\_\_\_\_ Television: \_\_\_\_\_ Other: \_\_\_\_\_

Have you filed a bankruptcy in the last 8 years? \_\_\_\_\_

If Yes, please provide the following, if known:

Case No.: \_\_\_\_\_ Date Filed: \_\_\_\_\_ State and District: \_\_\_\_\_

Do you have access to a computer? \_\_\_\_\_

**SECTION 2: REAL PROPERTY INFORMATION**

(check one)  
I Rent My Home: \_\_\_\_\_ I Am Purchasing My Home: \_\_\_\_\_

For Renters:  
Name of your landlord: \_\_\_\_\_  
How much is the monthly rent payment? \_\_\_\_\_  
Are you behind on your rent payments? \_\_\_\_\_  
If behind, how many months behind? \_\_\_\_\_

For Purchasers:  
What do you think the value of your home is? \_\_\_\_\_  
Do you want to keep your home? \_\_\_\_\_

First Mortgage	Second Mortgage
Who do you make payments to? _____	Who do you make payments to? _____
When did you get this mortgage? _____	When did you get this mortgage? _____
How much is the monthly payment? _____	How much is the monthly payment? _____
What is the balance of the mortgage? _____	What is the balance of the mortgage? _____
Are you behind on the payments? _____	Are you behind on the payments? _____
If behind, how many months? _____	If behind, how many months? _____

Do you owe any other money on your home (ex: homeowners association, taxes, judgments)?  
If yes, name of the person you owe: \_\_\_\_\_  
Balance owed: \_\_\_\_\_

Do you own, or is your name on the title, to any other real estate? (ex: condo, house, church, burial plot, land, timber, crops, time share, heir property, life estate, etc.)  
If yes, please list the following:  
Type of property: \_\_\_\_\_  
Address of property: \_\_\_\_\_  
Value of property: \_\_\_\_\_  
Liens against the property: \_\_\_\_\_

Please list the names and ages of all persons that reside in your household with you:  
\_\_\_\_\_

**SECTION 3: PERSONAL PROPERTY INFORMATION**

**BANK ACCOUNTS**

Bank: _____	Bank: _____	Bank: _____
Account Type (checking, savings, etc.): _____	Account Type (checking, savings): _____	Account Type (checking, savings, etc.): _____

Have you closed any bank accounts within the past year? If yes, please list the following:  
Name of the bank: \_\_\_\_\_  
Type of account: \_\_\_\_\_  
Date account was closed: \_\_\_\_\_  
Amount of money in account at time of closing: \_\_\_\_\_  
What did you do with the money at closing: \_\_\_\_\_

**VEHICLES**

**Including paid for and financed cars, trucks, boats, RV's, trailers, motorcycles, 4-wheelers, dirt bikes, etc.  
Please also include all wrecked and non-drivable vehicles, and those driven by children that are titled in your name**

Year: _____	Year: _____	Year: _____
Make: _____	Make: _____	Make: _____
Model: _____	Model: _____	Model: _____
Mileage: _____	Mileage: _____	Mileage: _____
Finance Company: _____	Finance Company: _____	Finance Company: _____
Balance of Loan: _____	Balance of Loan: _____	Balance of Loan: _____
Monthly Payment: _____	Monthly Payment: _____	Monthly Payment: _____

Year: _____	Year: _____	Year: _____
Make: _____	Make: _____	Make: _____
Model: _____	Model: _____	Model: _____
Mileage: _____	Mileage: _____	Mileage: _____
Finance Company: _____	Finance Company: _____	Finance Company: _____
Balance of Loan: _____	Balance of Loan: _____	Balance of Loan: _____
Monthly Payment: _____	Monthly Payment: _____	Monthly Payment: _____

Have any vehicles been repossessed, salvaged, transferred, or sold in the last 2 years? If yes, please list the following:

Year, make, and model of vehicle: \_\_\_\_\_  
 What happened to the vehicle: \_\_\_\_\_

**FINANCIAL ACCOUNTS**

Do you have a life insurance policy? Insurance Co.: _____ Term or Whole: _____	Do you have any stocks, annuities, bonds, etc.? Company: _____ Type of Account: _____	Do you have an IRA, 401(k), education savings, or other retirement account? Company: _____ Type of Account: _____
Insurance Co.: _____ Term or Whole: _____	Company: _____ Type of Account: _____	Company: _____ Type of Account: _____

**BUSINESS**

Do you own a business or have you closed a business in the past 4 years?  
 Name of business \_\_\_\_\_  
 Type of Business \_\_\_\_\_  
 Please list any tools, inventory, or equipment, along with the value of the property:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**MONEY OWED TO YOU**

Are you owed past due child support or alimony? Type: _____ Amount owed to you: _____ Monthly payment amount: _____	Have you received, or do you expect to receive an inheritance? Amount anticipated: _____ Date expected to receive: _____	Are you expecting any income from a pending lawsuit or class action? Date lawsuit filed: _____ Who is suit against? _____ Amount expected to receive: _____
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Do you owe any child support or alimony?  
 Name of recipient \_\_\_\_\_  
 Monthly payment amount: \_\_\_\_\_ Amount past due: \_\_\_\_\_

