



Essig Law
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Admitted to Practice:
State Bar of Arizona 1988
Arizona Federal District Court 1988
U.S. Court of Appeals Ninth Circuit
1989
Certified Mediator

CLIENT INFORMATION SHEET

(PROTECTED INFORMATION - CONFIDENTIAL)

1) Client Name: _____

2) Client Home or Business Address: (please specify)

3) Client Mailing Address (if different): _____

4) Client Telephone (Residence) Number: _____

5) Client Telephone (Work) Number: _____

6) Client Telephone (Cell) Number: _____

7) Client Alternate Telephone Number: _____

8) Client Fax Number: _____

9) Client E-Mail Address: _____

- a. Is the E-mail on a secured line: ____ Yes ____ No
- b. Are we authorized to communicate with you via E-mail:
____ Yes ____ No

10) Social Security/EIN/TPT/Withholding Numbers (all that are applicable):

11) Client Date of Birth ____ (date) ____ (month) ____ (year)

12) Person to notify in case of emergency. Name/Relationship/Address/PhoneNumber:

13) If the Client is other than an individual, please complete the following:

- a. List the name of the business and its principle operation(s):

- b. Over the past five (5) years have you or your company gone by another name or business entity: _____ Yes _____ No. If yes, please specify in detail.

- c. If the business is a partnership, LLC, P.C., corporation, etc. specify all parties (officers, partners, etc.), their position/title, duties/responsibilities within the business.

- d. If the business is incorporated, please list the date of incorporation; the business name that is recorded with the corporation commission; where (State) the business is incorporated; the statutory agent; and officers of the corporation. If the business is a partnership, please list the date of recording with the secretary of state, the partners and the type of partners (LLC, general partner, etc.)

- e. List the legal business entity type (partnership, LLC, corporation, etc.).

14) (a) Reason for Appointment:

(b) If meeting concerning a debt/collection/tax settlement (offer-in-compromise), please provide information on the financial statement that is on the website (or attached).

(c) If case involves a litigation matter and/or time response which is time sensitive, please state whether you, and in what capacity (individually, officer as a corporation, etc.) you were named; when you received – “were served” with the Complaint/other document-item requiring a response; the other individuals/entities that are involved (to the best of your knowledge):

15) Have any issues or deadlines expired or are about to expire. ____ Yes ____ No
If so, when?

16) Have there been any prior related actions (arbitration, mediation, litigation problems in general, etc.), regarding the issue(s) in hand, etc. ____ Yes ____ No.
If yes, please specify when, where, and the outcome.

17) (a) Anticipated/desired outcome in this legal matter.

(b) Is there anything else, regardless of the nature/relation to the matter, that you believe I should now that may help in your representation and/or is important to know in general.

18) List the name of the party completing this client input sheet and all associated information as well the position title.

19) (If applicable) For the person completing this client input sheet and providing all associated information, are you authorized to complete this information on behalf of the business?
____ Yes ____ No

20) Special instructions and/or restrictions:

21) Billing rate/fee quoted: _____

22) Responsible Attorney: _____

23) Attorney(s)/Paralegal(s) assigned: _____

The undersigned party represents that the above information and statements are accurate and true to the best of their ability. Further, the undersigned party specifically asserts that he/she has the authority and knowledge to complete the requested information herein.

Dated, this ____ day of ____, year ____

(Print Name) (If Business, print name of business and your title)

(Signature)

Dated, this ____ day of ____, year ____

(Print Name) (If Business, print name of business and your title)

(Signature)