

Date _____

INITIAL DOMESTIC CLIENT INFORMATION SHEET

PLEASE TAKE A MOMENT TO ANSWER THE QUESTIONS BELOW. ALL ANSWERS WILL BE KEPT CONFIDENTIAL.

CLIENT'S INFORMATION

NAME: _____ MAIDEN NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

- MAY WE CONTACT YOU AT THE ABOVE ADDRESS? YES NO

ALTERNATE CONTACT ADDRESS: _____

TELEPHONE: HOME: (____) _____ WORK: (____) _____

CELL/PAGER: (____) _____ FAX: (____) _____

- MAY WE CONTACT YOU AT THE ABOVE PHONE NUMBER(S)? YES NO

ALTERNATE CONTACT PHONE NUMBER: (____) _____

E-MAIL ADDRESS: _____

- MAY WE CONTACT YOU AT THE ABOVE E-MAIL ADDRESS? YES NO

ALTERNATE E-MAIL: _____

- MAY WE ADD YOUR E-MAIL ADDRESS TO OUR MAILING LIST YES NO

- INVOICE/BILLING PREFERENCE? EMAIL or U.S. MAIL (please circle one)

SOCIAL SECURITY NUMBER: _____ D/O/B _____

SPOUSE'S INFORMATION

NAME: _____ MAIDEN NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: HOME: (____) _____ WORK: (____) _____

CELL/PAGER: (____) _____ FAX: (____) _____

EMAIL: _____

SPOUSE'S SOCIAL SECURITY NUMBER: _____ D/O/B _____

MARRIAGE INFORMATION:

DATE OF MARRIAGE: _____

PLACE OF MARRIAGE: _____

CHILDREN:

NAME: _____ D/O/B: _____

NAME: _____ D/O/B: _____

NAME: _____ D/O/B: _____

EMPLOYER INFORMATION:

EMPLOYER: _____

ADDRESS: _____ PHONE NO. (____) _____

_____ HIRE DATE: ____ / ____ / _____

SPOUSE'S EMPLOYER: _____

ADDRESS: _____ PHONE NO. (____) _____

_____ HIRE DATE: ____ / ____ / _____

HOW DID YOU FIND OUT ABOUT OUR OFFICES?

_____ VERIZON (IDEARC) SUPER PAGES

_____ WEBSITE

_____ YELLOW BOOK USA / BERRY

_____ NEWSPAPER / SENIOR FOCUS

_____ E-Z TO USE BIG BOOK

_____ REFERRAL FROM _____

_____ OTHER (PLEASE SPECIFY) _____

THANK YOU,
DAVID K. LUCAS AND ASSOCIATES