



Referred by: _____

Date _____

AN ASSET PROTECTION AND WEALTH PRESERVATION LAW FIRM

SATELLITE OFFICE
 4909 Williams Drive
 Georgetown, Texas 78633
 (512) 766-3782

PRINCIPAL OFFICE
 15600 SAN PEDRO, SUITE 100
 SAN ANTONIO, TEXAS 78232
 (210) 530-4278

SATELLITE OFFICE
 2232 Lawrence Blvd.
 Alamogordo, New Mexico 88310
 (575) 430-2353

Prospective Business Client Questionnaire

Please complete this form and return it to our office before you meet with us by faxing it to 210-247-9396, 512-766-3782 or emailing it to **Lori@marquardtlawfirm.com**. If you have any questions, please call **210-530-4278** or **512-766-3782** and ask for **Lori**.

CHIEF EXECUTIVE OFFICER AND ENTREPRENEUR

What topics would you like to discuss at your appointment?	
Name of Business	
Full Legal Name & Date of Birth	
Home Address (street)	
City, State Zip Code	
Citizenship/Soc. Sec. No.	
Home Phone Cell Phone	
E-mail address	
Occupation/Name of Employer	
Existing Corp., LLCs, Partnerships?	
Existing EIN/TIN	
Present or proposed product(s) or service(s) for business	
Present or proposed management structure for the business	
Military Service?	

Marquardt Law Firm, P.C. Questionnaire

PRINCIPAL ADVISORS

Name of Accountant/CPA	
Bookkeeper/Payroll	
Coach/Consultant	
Life Insurance Agent	
Financial Advisor	
Long-Term Care Insurance	
Auto/Home Insurance	
Religious affiliation	

WHAT IS YOUR SUCCESSION PLAN FOR THE BUSINESS?

- A) LIVE FOREVER;**
- B) LEAVE IT TO YOUR CHILDREN OR OTHER FAMILY MEMBERS; OR**
- C) SELL IT AND USE THE PROCEEDS FOR RETIREMENT.**

WHO WOULD BE IN CHARGE OF THE BUSINESS IF YOU SUFFERED A SUDDEN CATASTROPHIC ACCIDENT OR ILLNESS?

Marquardt Law Firm, P.C. Questionnaire

STOCKHOLDERS, PARTNERS, OR MEMBERS

full legal name:	Gender (male or female)	
Address:		
	Phone number:	
Share of Ownership?		
Contributions to the business?		
full legal name:	Gender (male or female)	
Address:		
	Phone number:	
Share of Ownership?		
Contributions to the business?		
full legal name:	Gender (male or female)	
Address:		
	Phone number:	
Share of Ownership?		
Contributions to the business?		
full legal name:	Gender (male or female)	
Address:		
	Phone number:	
Share of Ownership?		
Contributions to the business?		

Number of exempt employees: _____

Number of non-exempt employees: _____

Number of independent contractors: _____

Marquardt Law Firm, P.C. Questionnaire

ASSETS OF THE BUSINESS

Please list the values of the business assets (*it is important for us to properly diagnose any unforeseen or unanticipated problems*):

	Contributions by Self	Contributions by Other Shareholders
Real Estate:		
Real Estate:		
Stocks/Bonds/Mutual Funds		
Checking Account		
Savings Account		
CDs/Money Market		
IRA's & 401k, 403b		
Sinking fund		
Automobile		
Automobile		
Life Insurance for buy-sell or key man		
Equipment		
Inventory		
Accounts receivable		
Goodwill		
Other: _____		

Additionally, we would appreciate it if you could help us by bringing copies of your existing corporation, partnership, LLC(s) (and contracts, if any).