

PM# \_\_\_\_\_

www.mezherlaw.com

time: f:

| BASIC INFORMATION        | CLIENT |       | SPOUSE |       |
|--------------------------|--------|-------|--------|-------|
| Your Name                |        |       |        |       |
| E-mail address           |        |       |        |       |
| Mailing Address          |        |       |        |       |
| City, State, Zip Code    |        |       |        |       |
| Phone Number             | Home:  | Work: | Home:  | Work: |
| How long at this Address | Cell:  |       | Cell:  |       |
| Social Security Number   | SS#    |       | SS#    |       |
| Employer Name/Position   |        |       |        |       |
| Current Yearly Income    |        |       |        |       |

| A S S E T S         | CLIENT |    | SPOUSE |    | DESCRIPTION      |
|---------------------|--------|----|--------|----|------------------|
| Automobile(s)       | Yes    | No | Yes    | No | Year/Make/Model: |
| Real Estate         | Yes    | No | Yes    | No | Location:        |
| Checking Account    | Yes    | No | Yes    | No | Balance:         |
| Savings Account     | Yes    | No | Yes    | No | Balance:         |
| Pension/IRA/401K    | Yes    | No | Yes    | No | Balance:         |
| Life Insurance      | Yes    | No | Yes    | No | Surrender Value: |
| Household Furniture | Yes    | No | Yes    | No | Describe:        |
| Collections/Jewelry | Yes    | No | Yes    | No | Describe:        |
| Stocks/Bonds        | Yes    | No | Yes    | No | List:            |

Are you being garnished? Yes/No; if yes by who: \_\_\_\_\_  
 Are you being sued or foreclosed? Yes/No; if yes describe: \_\_\_\_\_  
 Have you ever filed bankruptcy before? Yes/No; if yes when: \_\_\_\_\_  
 Has any of your property been repossessed? Yes/No; if yes describe: \_\_\_\_\_  
 How were you referred to our office? \_\_\_\_\_

\*\*\*\*Please provide us with your driver's license when returning this sheet\*\*\*\*

**LIST YOUR MAJOR BILLS (use reverse side of paper if necessary)**

| CREDITOR NAME | Balance | Monthly Payment | How far behind | Joint or Single | Collateral Pledged |
|---------------|---------|-----------------|----------------|-----------------|--------------------|
| 1.            |         |                 |                |                 |                    |
| 2.            |         |                 |                |                 |                    |
| 3.            |         |                 |                |                 |                    |
| 4.            |         |                 |                |                 |                    |
| 5.            |         |                 |                |                 |                    |

OFFICE USE ONLY: KDM FEE BDF LSP PREPAID AARP WS-GIVEN Y N REF:  
 FEES\$ 7 13 why \_\_\_\_\_ NEG RE- FIN NO-BK RET \$ \_\_\_\_\_ C MO PCK DEB W-RET THINKER LETTER NOR AND WC KY

Safe Deposit Box Loan/401K Transfer Assets Tax Refund Legal Claim Called / /  
 Co-Signer Co-signed Stu Ln Taxes Child Sup 13% \_\_\_\_\_ PAY \_\_\_\_\_ Cram \_\_\_\_\_ Strip \_\_\_\_\_ PM Acct MSG LET