

Number range CHAPTER Client No: _____

L/D Code: _____

CLIENT INTERVIEW SHEET

Company or Client Name: _____

Contact Person or Spouse: _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Work: _____

Cell: _____ Fax No: _____

Home Email: _____ Work Email: _____

Person Responsible for Payment of Account: _____

Billing to be received via regular mail or email? _____

Referred By: _____

Office use only below this line

Attorney: _____ Date Opened _____

Account Type (i.e. water, real estate, etc.): _____

Work Being Performed: _____

___ Attorney/Client Agreement (e) mailed _____

___ Attorney/Client Agreement received _____

Checklist for new clients:

___ New Client Book - Get Number and Long Distance Code

___ Make new folder in WP

___ Attorney Client Agreement

___ Client Letter

___ Client Interview Sheet

___ Label for Folder(s)

___ Add to Conflict Database

___ Enter in Quick Books

___ Enter in Outlook Contacts and Global Contacts