
Jolly Esquire P.A.C.

1217 E. Robinson Street □ Orlando, FL 32801
Local (407) 894-0503 □ Toll Free 1(877)898-0503 □ Fax: 1 (877) 800-0301
KJOLLY@JOLLYESQUIRE.COM □ WWW.JOLLYESQUIRE.COM

QUESTIONNAIRE: CONFIDENTIAL BUSINESS INFORMATION

INSTRUCTIONS: Answer all questions truthfully and completely. The information you enter in this questionnaire is confidential and protected by Attorney-Client Privilege. The information will not be disclosed to anyone outside of this office, except in the course of rendering legal services on your behalf, or unless otherwise required by law

Date: _____

CLIENT INFORMATION

Your Name: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Home Facsimile No: _____

Cell Phone No: _____ Pager/Beeper No: _____

E-mail Address: _____

Soc. Sec. No: _____ Date of Birth: _____

Driver's License No.: _____ State of Issuance: _____

Other names you have been known by: _____

EMPLOYER: _____

Work Address: _____

City: _____ State: _____ Zip Code: _____

Work Phone: _____ Work Facsimile No: _____

Work E-mail Address: _____

Nature of matter / reason for seeking consultation with our office: _____

Your position/status with entity (for example, President, shareholder, member, etc.): _____

How did you hear about our office: _____

CPA or TAX ADVISOR

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Facsimile No: _____

E-mail Address: _____

INFORMATION ABOUT YOUR BUSINESS AND BUSINESS PARTNER(S)

(Your business partners, if any, should provide the same information you have provided above)

OTHER BUSINESS PARTICIPANTS

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Facsimile No: _____

E-mail Address: _____

Relation of this person to you: _____

Is this person represented by an ATTORNEY in this matter? Yes No

If YES, please answer the questions below:

Name of Attorney/Firm: _____

City where office located: _____ Phone: _____

Indicate if this attorney has:

Ever provided advice or other services to you?

Yes No

Talked with you in person or by telephone?

Yes No

Sent a letter or other written communication to you?

Yes No

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Facsimile No: _____

E-mail Address: _____

Relation of this person to you: _____

Is this person represented by an ATTORNEY in this matter? ___ Yes ___ No

If YES, please answer the questions below:

Name of Attorney/Firm: _____

City where office located: _____ Phone: _____

Indicate if this attorney has:

Ever provided advice or other services to you?

Yes No

Talked with you in person or by telephone?

Yes No

Sent a letter or other written communication to you?

Yes No

In addition, if you have business partners, who are expected to initially own the business, in what percentages, and for what contributions?

<u>Owner</u>	<u>Ownership</u>	<u>Percentage of Contribution</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Which of the owners are expected to be employed by the business? _____

In what capacities? _____

For what compensation? _____

Are there any written contracts between you and your business partners, if any?
Yes _____ No _____ (If yes, please provide a copy)

INFORMATION ABOUT MANAGEMENT STRENGTHS AND WEAKNESSES

What strengths do you and your business partners bring to the table that you expect will help make the business a success?

What weaknesses or deficiencies in experience do you and/or your business partners have?

INFORMATION ABOUT THE PROPOSED BUSINESS

Have you taken any steps to incorporate your business? Yes_____ No_____ (If yes, provide details)

Have you been presented with any financial statements, documents describing the business opportunity, or a franchise offering circular? Yes_____ No_____ (If yes, provide your lawyer with a copy)

Do you have a written Business Plan? Yes_____ No_____ (If yes, provide your attorney with a copy of it)

Have you offered to sell or sold any interests in your business to any investors? Yes_____ No_____ (If yes, provide details)

Have you obtained or sought to obtain any loans for your business? Yes _____
No _____ (If yes, provide details)

Does the prospective business own or lease any real estate? Yes _____ No _____ (If
yes, provide details)

Do you have an to continue operating the business from its present location(s)? Yes _____
No _____

Have you retained any consultants, accountants or tax professionals? Yes _____
No _____ (If yes, provide details)

Have you promised an interest in the company to any consultants? Yes _____
No _____ (If yes, provide details)

OTHER QUESTIONS

(Make a list of other pertinent questions to ask your attorney)