Initial Consultation Worksheet

CLIENT NAME:			Tele#:			DATE:		
Found Us Through: Address:								
Bankruptcy in last 8 years? Y / N If Yes, what chapter? 7 / 13 Discharge Received? Y / N								
WA Resident for at least Last 2 Years? Yes / No [other state(s)]	
========	=======	=======	======	:=====	====	====	======	=======
IC Conducted by: RCR / SR / EM								
1. Car/Other Secured Claims								
Creditor		Fair Mkt Value	Debt Owed	Equity	Arrea	ars?	365/ 910	Try to Keep?
or carror	Conateral	ran wikt value	Dest owed	Equity	711700	<i>.</i>	claim?	,
								Y / N / ?? Y / N / ??
								Y / N / ??
								Y / N / ??
								Y / N / ??
2. Home Claims								
Creditor	reditor Fair Mkt Value		Equity	Arrears?		Foreclosure? Try to		Try to Keep?
								Y / N / ??
								Y / N / ?? Y / N / ??
3. Attached Debt Issues - Reviewed with client (ATTACH) Y / N 4. Unsecured Debt: \$								
5. Tax Returns:	<u>Y / N</u> →	Unfiled: FED: STATE:						
6. Owes Money	<u>Y / N</u>	Gross Income: DR: \$ SP: \$						
7. Wells Fargo D	<u>Y / N</u>	Household Size:						
8. Issues: 109/362? prior+ None apparent; Maybe; Definite Issue:								
(2) ANY Business Issues? Y / N? Advised client of general fee est. (\$2,500 - \$5,000 BUT reduced if truly SIMPLE)								
(3) Actual fee ESTIMATE given? \$ Because								
[Make sure client	gets their copy	of Initial Cons	ultation Agree	ement]				