

CLARK & WASHINGTON, P.C.

CLIENT WORK SHEET

(770) 499-9334

www.CW13.com

YOUR FULL NAME: _____ DATE: _____

First Middle Last

SOC. SEC. # _____

STREET ADDRESS: _____

MAILING ADDRESS (IF DIFFERENT) _____

COUNTY _____ E-MAIL: _____

HOME PHONE: () _____ CELL PHONE: () _____

WORK PHONE: () _____; MARITAL STATUS: ___ single; ___ separated ___ married;

If you are *married and not separated*, we need your spouse's info as well

SPOUSE'S FULL NAME: _____

First Middle Last

SOC. SEC. # _____ E-MAIL: _____

CELL PHONE: () _____ WORK PHONE: () _____

REASON FOR VISIT TODAY _____

If you are an existing client: Case number: _____ Is the above address new? ___ YES ___ NO

If you are NOT an existing client:

HAVE YOU OR YOUR SPOUSE EVER FILED FOR BANKRUPTCY? ___ YES; ___ NO.

LIST YOUR MONTHLY GROSS INCOME BEFORE DEDUCTIONS:

	YOU	YOUR SPOUSE
WAGES		
SELF EMPLOYMENT		
RETIREMENT/ SS		
OTHER		

Would you like us to pull your credit report for \$20 per person? Y N