Please help us to assist you by filling out this form for your initial consultation.

CONFIDENTIAL BUSINESS PLANNING CHECKLIST

We recognize that this information is of a personal nature. We assure you that all information provided to this office will be treated confidentially and will not be revealed to anyone outside of this office without your permission.

GENERAL INFORMATION

Date: ____________________

Company name____
Address of principal office____
Company phone____
Type of Business____
State of Formation____
Form of Business
____ C Corp ____ S Corp ____ LLC _____ Partnership _____ Limited Partnership

Who are the officers
President____________________________________
V-P____
Secretary____________________________________
Treasurer____________________________________

Shareholder names and contact info (use separate sheets of paper if necessary):

Name_____________________________________	Name_____________________________________
Address___________________________________	Address___________________________________
____	____
Home ph__________________________________	Home ph__________________________________
Cell ph___________________________________	Cell ph___________________________________
Email_____________________________________	Email_____________________________________
No. shares_________________________________	No. shares_________________________________
Name_____________________________________	Name_____________________________________
Address___________________________________	Address___________________________________
____	____
Home ph__________________________________	Home ph__________________________________
Cell ph___________________________________	Cell ph___________________________________
Email_____________________________________	Email_____________________________________
No. shares_________________________________	No. shares_________________________________

Name of Accountant____
Phone Number of Accountant____

Name of Company Attorney____
Phone Number of Company Attorney____

Are any of the owners related? If so, state relationship______________________________

Objectives

Please think about each of the three objectives and jot down your current thoughts:

Date you wish to retire from your business_______________________________________
Amount of after-tax annual income you want upon retirement________________________
Persons to whom you want to transfer your company______________________________

Company Value

Current Value of 100% of the business: $___________________________
Determined by: ___________________________ on _______________________

Please gather the following documents (if they exist):

1. Corporate minute book
   - A. Articles of Incorporation
   - B. By-laws
   - C. Minutes showing current officers and directors
2. Most recent month-end and year-end financial statements for the business
3. Cash flow projections for next 3 years
4. Written employee incentive and compensation plans
5. Last year's tax return
6. Previous Buy-Sell Agreement
7. Most recent appraisal or valuation of Company
8. Your personal financial plan
9. Your personal Net Worth statement
10. Your current Will, Trust, Power of Attorney, Healthcare Power of Attorney and Living Will
11. Insurance policies (company owned and your personal policies)
12. Employee Handbook
13. Employee Benefits Plan (qualified and non-qualified)