

RILEY LEWIS & McLENDON

A T T O R N E Y S A T L A W

315 WASHINGTON AVENUE
MARIETTA, GEORGIA 30060

TELEPHONE: 770-590-5900
FACSIMILE: 770-590-0400

Business Name: _____

Date First Shares/Units Issued: _____

Primary Business Address: _____

Number of Shares/Units Authorized: _____

Purpose/Type of Customers & Products/Services: _____

Types of Shares/Units: _____

Shares/Units/Price Issued - Name/Number/Price: _____

Registered Agent: _____

Registered Agent Address: _____

EI Number/SS Number (if EI not yet issued): _____

Primary Contact Name/Phone Number: _____

Officers/Managers - Name/Title: _____

Phone Number: _____

Board of Directors/Management Committee: _____

Fax Number: _____

Email/Website: _____

Corporation C-Corp S-Corp
LLC Member Managed Manager Managed

Name of Tax Contact: _____

Date Incorporated/Organized: _____

Number of Employees in Coming Year: _____

CLIENT INTAKE INFORMATION