

BUSINESS ENTITY FORMATION CLIENT INTAKE FORM - CORPORATIONS -

Client: _____ **Referred by:** _____

Address: _____

Phones #: +1 () _____ (H) and +1 () _____ (W)
+1 () _____ (Fax) and +1 () _____ (Pg/Cell)

E-Mail: _____
(IF MORE SPACE IS REQUIRED PLEASE INSERT HERE OR PRINT ON THE BACK)

Promoters¹: _____ **SSN:** _____

Address: _____

Phone# +1 () _____ (H) and +1 () _____ (W)
+1 () _____ (Fax) and +1 () _____ (Other)

E-Mail: _____

Name: _____ **SSN:** _____

Address: _____

Phones #: +1 () _____ (H) and +1 () _____ (W)
+1 () _____ (Fax) and +1 () _____ (Pg/Cell)

E-Mail: _____
(IF MORE SPACE IS REQUIRED PLEASE INSERT HERE OR PRINT ON THE BACK)

Subscribers²: _____ **SSN:** _____

Address: _____

Phones #: +1 () _____ (H) and +1 () _____ (W)
+1 () _____ (Fax) and +1 () _____ (Pg/Cell)

E-Mail: _____
(IF MORE SPACE IS REQUIRED PLEASE INSERT HERE OR PRINT ON THE BACK)

Incorporators³: _____ **SSN:** _____

Address: _____

Phones #: +1 () _____ (H) and +1 () _____ (W)
+1 () _____ (Fax) and +1 () _____ (Pg/Cell)

E-Mail: _____
(IF MORE SPACE IS REQUIRED PLEASE INSERT HERE OR PRINT ON THE BACK)

Name of Corporation: (Full Name) _____
(Short Form or Initials) _____

S Corporation Election: (Y/N) _____

Term of Existence: Perpetual or No. of Years and Termination Date _____ (CIRCLE ONE)

Offices:

Principal Office Location: _____

¹ Persons acting on behalf of the Corporation not yet formed.

² Persons/entities who make written offers to buy stock from the Corporation not yet formed.

³ Person/entity that signs and files the Articles of Incorporation with the Secretary of State

Other Offices (Inside/Outside State): _____

(IF MORE SPACE IS REQUIRED PLEASE INSERT HERE OR
PRINT ON THE BACK)

Location of Accounting and Corporate Books: _____

Accountant/Book keeper: _____

Address: _____
Phone# +1 () (H) and +1 () (W)
+1 () (Fax) and +1 () (Other)
E-Mail: _____

Registered Agent: _____ **SSN:** _____

Address: _____
Phone# +1 () (H) and +1 () (W)
+1 () (Fax) and +1 () (Other)
E-Mail: _____

Capitalization:

Total Capital: _____

Number of Shares: _____

Class of Shares:

Preferred: _____

Common: _____

Other: _____

Consideration: \$ _____

\$ _____

\$ _____

Shareholders: _____ **SSN:** _____

Address: _____
Phone# +1 () (H) and +1 () (W)
+1 () (Fax) and +1 () (Other)
E-Mail: _____ Number of Shares: _____ Type of Shares _____

Name: _____ **SSN:** _____

Address: _____
Phones #: +1 () (H) and +1 () (W)
+1 () (Fax) and +1 () (Pg/Cell)
E-Mail: _____ Number of Shares: _____ Type of Shares _____

(IF MORE SPACE IS REQUIRED PLEASE INSERT HERE OR PRINT ON THE BACK)

Initial Director(s): _____ **Number:** _____ **Initial Term of Office:** _____

Name: _____ **SSN:** _____

Address: _____

Phones #: +1 () (H) and +1 () (W)

+1 () (Fax) and +1 () (Pg/Cell)

E-Mail: _____

(IF MORE SPACE IS REQUIRED PLEASE INSERT HERE OR PRINT ON THE BACK)

Officers: **Term of Office:**_____

President:

Name:_____ **SSN:**_____

Address:_____

Phones #: +1 () (H) and +1 () (W)
+1 () (Fax) and +1 () (Pg/Cell)

E-Mail:_____

Duties:_____

Vice President:

Name:_____ **SSN:**_____

Address:_____

Phones #: +1 () (H) and +1 () (W)
+1 () (Fax) and +1 () (Pg/Cell)

E-Mail:_____

Duties:_____

Secretary:

Name:_____ **SSN:**_____

Address:_____

Phones #: +1 () (H) and +1 () (W)
+1 () (Fax) and +1 () (Pg/Cell)

E-Mail:_____

Duties:_____

Treasurer:

Name:_____ **SSN:**_____

Address:_____

Phones #: +1 () (H) and +1 () (W)
+1 () (Fax) and +1 () (Pg/Cell)

E-Mail:_____

Duties:_____

Bylaws:

Adoption Procedure:_____

Approval by Shareholders: Y/N_____ **Vote Required to Ratify:**_____

Special Voting Requirements- Actions requiring a higher vote than required by statute (Amendments, etc.)

Directors vote:_____

Stockholders vote:_____

Amendments:

Method of Amending: _____

Approval by Directors/Shareholders: _____

Quorum and vote required to ratify: _____

Calendar/Fiscal Year: _____ (CIRCLE ONE AND CHOOSE A DATE)

Date of Annual Meeting: _____

Location: _____

Purpose of Corporation:

1. **General Purposes:** _____

2. **Specific Purposes and Powers:**

3. **Corporate Operations:**

Y/N

1) Will the Corporation hire employees

2) Engage in Joint Ventures

3) Acquire other businesses

4) Aid Customers financially and operationally

a) Lend funds

b) Lease or lend property

c) Forgive debts

5) Grant licenses, franchises and rights in corporate assets

6) Manufacture and sell products

7) Engage in service operations

b. **Property and Investments:**

1) Will the Corporation: Buy, sell, and exchange Property

a) Real, personal, intangible

b) Patents, trademarks, inventions

c) Licenses, franchises

2) Build and construct offices, warehouses, plants

3) Mortgage, pledge and release property

4) Lease property, both real and personal

c. **Financial Affairs:**

1) Will the Corporation: Borrow money

a) Secured/Unsecured

b) Pledge/Mortgage corporate assets

c) Issue bonds. Debentures, commercial paper

2) Accept Property in payment of debts

3) Make contributions and loans

a) charitable purposes

b) To Employees

c) Customers

d. **Indemnification of Directors/Officers:**

1) What particular actions indemnified? Civil/Criminal

2) Provide Insurance to Directors/Officers
