

ALBERTSON LAW GROUP, P.S.

Attorneys and Counselors at Law

CORPORATION QUESTIONNAIRE

Filling out the Questionnaire

- < Your Information will be held in *strictest confidence*.
- < You should fill in the full names of all people listed in the questionnaire. Please avoid the use of nicknames unless specifically asked for.
- < Please remember, you can always change the decisions you make here during the drafting process or by amending your documents after you have signed them.
- < This is a generic questionnaire so if questions do not apply, simply write in N/A.
- < If you need more room, please write on the back or attach additional pages.

Your documents will be based on the information you provide. To that end, please read and sign the following statement:

I understand that my Corporate documents will be based on the information provided herein. I further understand that my responses to the questionnaire are protected by the attorney-client privilege and will be held in utmost confidence. With these understandings, I affirm that the information provided herein is full, complete and accurate to the best of my present knowledge.

Dated: _____ Signed: _____

Dated: _____ Signed: _____

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CORPORATION QUESTIONNAIRE

Client: _____ File No.: _____

Date: _____ Responsible Attorney: _____

Contact Information

Residential Address: _____

City: _____ State: _____ Zip: _____

County: King Snohomish Pierce Other _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Numbers: Home: _____ Fax: _____

C1 Cell: _____ C2 Cell: _____

E-mail: _____

Birthdate: _____ SSN: _____ Nickname: _____

If not a US Citizen, what is your citizenship? _____

Employment

Employer: _____ Phone No. _____

Occupation: _____

Address: _____

If retired, occupation prior to retirement: _____

Personal Data:

Birthdate: _____ SSN: _____ Nickname: _____

If not a US Citizen, what is your citizenship? _____

Corporation Questions

1. Preferred name of Corporation: _____

2. Principal place of business of Corporation in Washington (physical address): _____

3. Mailing Address (if different): _____

4. What will be the purpose and character of business? _____

5. Officers (name, address and phone)

President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

6. Shareholders and Numbers of Shares:

Authorized: _____

Issued: _____

Names of Shareholders and numbers of shares issued to each: (see attachment)/

Contributed property (see attached).

7. Registered Agent for service of process and tax matters , name and address (NOTE: agent must be an individual, not a trust etc.):

8. Address where corporate records kept: _____

9. Bank Account:

Location: _____

Authorized Signatures: _____

How many required: _____

10. Fee quote: _____

11. Please obtain a check from the client for the filing fee (\$175).

12. Client want to review a draft? Yes No
(If answer is "no" it is assumed we will call client to set up signing.)

13. Advisors

Accountant: _____

Insurance: _____

ADDENDUM

Names of Shareholders

Number of Shares

Property to be contributed to corporation and fair market value at which it is being contributed.
Please supply documentation verifying the value of the property.

If additional property, have client provide list.