

Client Intake Form: Corporation (Illinois)

CONTACT INFORMATION

Name: _____

Telephone Number: _____

Email Address: _____

Date of Birth: _____

Address: _____

Social Security Number: _____

What is your favorite drink: _____

FORMATION

1. Name of Company (list 3 choices in order of preference in case the first one is not available):

| | |
|---------------|-------|
| First Choice | _____ |
| Second Choice | _____ |
| Third Choice | _____ |

Is there a D/B/A or any other name under which business is conducted? (If so, please explain):

When was the Corporation formed?: _____

Physical Location of the Organization (or office location): _____

Website of the Organization (if any): _____

2. When would you like for the Corporation to be created?

Date of Filing or Specific Date?

If Specific Date then what date: _____

3. What is the duration of the company? Perpetual or some other limitation with time?

4. Who would you like to be the incorporator(s)?: _____

5. Would you like for Cari B. Rincker of Rincker Law, PLLC to accept service of process on your behalf from the Illinois Secretary of State? Y N

6. Who is, or would you like to be, the registered agent? (Name, Address, Position, if applicable):

*Note: The next few sections ask for information that will be required when drafting bylaws

BOARD OF DIRECTORS

Names of owners and ownership interest:

| Name | Address/E-mail | Tax ID | Ownership Interest |
|------|----------------|--------|--------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Who will be on the initial board of directors (must have at least 1):

1. _____
2. _____
3. _____

Address for each:

1. _____
2. _____
3. _____

How will directors be elected?: _____

How long will the term for a director be?: _____

How will compensation and reimbursement be handled for the directors?:

How will vacancies on the board be handled?:

When will the annual meeting of the board meet?: _____

What is required for a special meeting?: _____

What will constitute a quorum?: _____

OFFICERS

If known, who will be the officers, specify the names, addresses, and their position (president, secretary, treasurer):

- 1. _____.
- 2. _____.
- 3. _____.
- 4. _____.

How long will the term for an officer be?: _____

How will compensation and reimbursement be handled for the officers?:

How will vacancies in an office be filled?:

MISCELLANEOUS

What percentage of vote of directors is needed for an amendment to the bylaws?: _____

When will the fiscal year run?: _____

What positions are permitted to do the following business transactions: (please place a check next to all that apply)

| | <u>Director</u> | <u>Officer</u> | <u>Employee</u> | <u>Agent</u> |
|--------------------------------|-----------------|----------------|-----------------|--------------|
| Enter into Contracts | | | | |
| Receive Loans | | | | |
| Sign Checks, Drafts, or Orders | | | | |

When did Business start or when do you intend to start operating?:

Have you hired employees?: _____ If not, do you intend to?: _____

When would they start?: _____ How many?: _____

SHARES

Please provide any specifications regarding your corporations shares, including:

- Classes – Number authorized for each class:

- Number to be issued:

- Limitations on voting rights:

- Special rights or restrictions:

- Consideration to be received for shares:
