

**Client Intake Form**  
**LIMITED LIABILITY COMPANY (LLC)**

Thank you for contacting our firm. How did you hear about us?

Today's Date: \_\_\_\_\_

Name of Client: \_\_\_\_\_

Address of Client: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Accountant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Business Advisor: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**1. Name of LLC**

1.1 (a) First choice: \_\_\_\_\_

(b) Second choice: \_\_\_\_\_

(c) Check LLC name availability (503-986-2200; www.filinginoregon.com)

LLC Name Available: \_\_\_\_\_

(d) Register LLC name \_\_\_\_\_ Yes \_\_\_\_\_ No

(e) Reserve LLC Name \_\_\_\_\_ Yes \_\_\_\_\_ No

1.2 Address of LLC: \_\_\_\_\_

1.3 Trade name(s): \_\_\_\_\_

(a) Check availability: \_\_\_\_\_ Yes \_\_\_\_\_ No

(b) Counties: \_\_\_\_\_

1.4 Patents, trademarks, copyrights to be registered or transferred: \_\_\_\_\_

**2. Capitalization**

2.1 Aggregate initial equity investment: \$ \_\_\_\_\_

2.2 Initial indebtedness - Secured: \$ \_\_\_\_\_

Unsecured: \$ \_\_\_\_\_

**3. Finances**

- 3.1 Contributions: \_\_\_\_\_
- 3.2 Allocation of Profits and Losses: \_\_\_\_\_
- 3.3 Distributions - Actual: \_\_\_\_\_  
Interim: \_\_\_\_\_  
Dissolution: \_\_\_\_\_

**4. Organizers/Members of LLC**

4.1 Name and Address: \_\_\_\_\_

Become of member of LLC? \_\_\_\_\_ Yes \_\_\_\_\_ No

Active in exercising control in LLC? \_\_\_\_\_ Yes \_\_\_\_\_ No, may be Membership  
Interests as Securities

Capital Contributions: \_\_\_\_\_

Obligation(s) in addition to contributions: \_\_\_\_\_

Provisions relating to capital accounts and their maintenance: \_\_\_\_\_

Percent of Ownership: \_\_\_\_\_

4.2 Name and Address: \_\_\_\_\_

Become of member of LLC? \_\_\_\_\_ Yes \_\_\_\_\_ No

Active in exercising control in LLC? \_\_\_\_\_ Yes \_\_\_\_\_ No, may be Membership  
Interests as Securities

Capital Contributions: \_\_\_\_\_

Obligation(s) in addition to contributions: \_\_\_\_\_

Provisions relating to capital accounts and their maintenance: \_\_\_\_\_

Percent of Ownership: \_\_\_\_\_

4.3 Name and Address: \_\_\_\_\_

Become of member of LLC? \_\_\_\_\_ Yes \_\_\_\_\_ No

Active in exercising control in LLC? \_\_\_\_\_ Yes \_\_\_\_\_ No, may be Membership  
Interests as Securities

Capital Contributions: \_\_\_\_\_

Obligation(s) in addition to contributions: \_\_\_\_\_

Provisions relating to capital accounts and their maintenance: \_\_\_\_\_

Percent of Ownership: \_\_\_\_\_

4.4 Name and Address: \_\_\_\_\_

Become of member of LLC? \_\_\_\_\_ Yes \_\_\_\_\_ No

Active in exercising control in LLC? \_\_\_\_\_ Yes \_\_\_\_\_ No, may be Membership  
Interests as Securities

Capital Contributions: \_\_\_\_\_

Obligation(s) in addition to contributions: \_\_\_\_\_

Provisions relating to capital accounts and their maintenance: \_\_\_\_\_

Percent of Ownership: \_\_\_\_\_

**5. Registered Agent**

5.1 Name of Registered Agent: \_\_\_\_\_

5.2 Address of Registered Agent: \_\_\_\_\_

**6. Organization**

6.1 Date of Formation of LLC:  
\_\_\_\_\_ when filed with Secretary of State  
\_\_\_\_\_ delayed until specified date \_\_\_\_\_

6.2 Management: \_\_\_\_\_ Member-Managed \_\_\_\_\_ Manager-Managed

6.3 If manager-managed, are there types of amendments to the articles of organization that managers may adopt without member action? ORS 63.441 and 444: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6.4 Latest Date of Dissolution:  
\_\_\_\_\_ LLC will dissolve on \_\_\_\_\_ (date)  
\_\_\_\_\_ LLC is perpetual

6.5 Professional Services - ORS 58.015  
\_\_\_\_\_ LLC will render professional services  
\_\_\_\_\_ LLC will not render professional services

**7. Membership**

7.1 Admission of New Members? \_\_\_\_\_ Yes \_\_\_\_\_ No

7.2 Withdrawal of Members? \_\_\_\_\_ Yes \_\_\_\_\_ No

7.3 Expulsion of Members? \_\_\_\_\_ Yes \_\_\_\_\_ No

**8. Goals**

8.1 What are your expectations in forming an LLC? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8.2 What are your non-tax reasons for having an LLC? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8.3 Have you discussed whether an LLC will assist in meeting these goals with your accountant and/or business advisor? \_\_\_\_\_ Yes \_\_\_\_\_ No

OTHER INFORMATION YOU THINK MAY ASSIST ME IN FORMING YOUR LLC? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_