

P.O. Box 1056 Richmond, KY 40476 Toll-free: 800-410-0656 Fax: 888-600-4068

www.counselorcapital.com

aw firm name		Contact name
address (number, street, o	city or town, state, zip code)	Suite
elephone	Fax	E-mail
Please answer the follow	ving questions: (check boxes where app	olicable)
. Our law firm is a: Corporation Partnership Other:	Professional Corporation Sole Proprietorship	Limited Liability Company Limited Liability Partnership
. The firm has been in	n practice since	
Number of employed Partners/Number of employed Controllers		Paralegals
. Description of practi	ice areas:	
. Approximate numbe	er of cases pending:	
. Approximate amoun	t of outstanding disbursements: \$	
. Approximate amoun	t of total contingent fees due to law	firm: \$
B. Does any other attor	rney or law firm have a financial inte	rest in any of your cases? No Yes (please explain)
. Does the firm have o	either duly executed retainer agreem	nents, or an OCA filed for each of its cases? No Yes
	sent any clients in which the agreed (	
Does the firm repres deducting reimbursem	sent any clients in which the agreed uents)? No Yes	
O. Does the firm represent deducting reimbursem  Does the firm currer	sent any clients in which the agreed uents)? No Yes	upon contingent fee is less than one-third of the recovery
Does the firm represent deducting reimbursem     Does the firm currer     Financial institution	sent any clients in which the agreed uents)? No Yes	upon contingent fee is less than one-third of the recovery borrowing? No Yes (please complete below) nt outstanding: \$
<ol> <li>Does the firm represent deducting reimbursem</li> <li>Does the firm currer Financial institution</li> <li>Amount of financing</li> </ol>	sent any clients in which the agreed uents)? No Yes  ntly maintain a line of credit or other  name: Amour	upon contingent fee is less than one-third of the recovery borrowing? No Yes (please complete below) nt outstanding: \$
<ol> <li>Does the firm represe deducting reimbursem</li> <li>Does the firm currer Financial institution</li> <li>Amount of financing</li> <li>Use of funds:</li> <li>Do you, or does the</li> </ol>	sent any clients in which the agreed uents)? No Yes  ntly maintain a line of credit or other name: Amour requested: \$ law firm, maintain any life insurance	upon contingent fee is less than one-third of the recovery borrowing? No Yes (please complete below) nt outstanding: \$
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O. Does the firm represe deducting reimbursem  Does the firm currer Financial institution  Amount of financing  Use of funds:  Do you, or does the Amount of insurance  Is the law firm currence  Has the law firm, and	sent any clients in which the agreed cents)? No Yes  Intly maintain a line of credit or other name: Amour requested: \$    Law firm, maintain any life insurance    Example 1: \$ Name    Ently the defendant in any lawsuit?	borrowing? No Yes (please complete below)  nt outstanding: \$
O. Does the firm represe deducting reimbursem  Does the firm currer Financial institution  Amount of financing  Use of funds:  Do you, or does the Amount of insurance  Is the law firm currence  Has the law firm, and	sent any clients in which the agreed cents)? No Yes  Intly maintain a line of credit or other name: Amour prequested: \$ Amour law firm, maintain any life insurance	borrowing? No Yes (please complete below)  nt outstanding: \$
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<ol> <li>Does the firm represe deducting reimbursem</li> <li>Does the firm currer Financial institution</li> <li>Amount of financing</li> <li>Use of funds:</li> <li>Do you, or does the Amount of insurance</li> <li>Is the law firm currence</li> <li>Has the law firm, and</li> <li>Are all partners/me</li> <li>Does the firm have recarrier:</li> <li>How did you hear ab</li> </ol>	sent any clients in which the agreed cents)? No Yes  Intly maintain a line of credit or other name: Amour requested: \$ Amour law firm, maintain any life insurance ex \$ Name ently the defendant in any lawsuit?  In partner or member ever declared by partner or member ever declared by maintain and firm in good standing malpractice insurance? No Yes pout Counselor Capital, LLC? International in the central country of the law firm in good standing malpractice insurance? No Yes pout Counselor Capital, LLC? International central	borrowing? No Yes (please complete below)  nt outstanding: \$

Law firm name		Contact name	
Address (number, street, city	or town, state, zip code)		Suite
Telephone	Fax	E-mail	
Applicant name			
Home address			
Date of birth	Social security number		
authorize all credit agencie which this statement has be the statement has be the statement authorization, in original understand that I have the theorem of the statement of the statement and the statement are statement as the statement of the	es to release information they may een filed or their agents. nal or copy form, shall be valid for he right to request additional disc	this and any future reportlessure as to the nature	. In connection with this request, I ual listed above, to the company with rts or updates that may be requested. and scope of the credit review, upon I the attachments in all respects.

Please complete one copy of this form for each partner.

## **Attorney Financial Statement**

Partner/Member name		
Home address		 
Date of birth	Social security number	

Assets	Amount	Liabilities	Amount
Cash, Savings, CDs		Notes Payable (Schedule D)	
Marketable Securities (Schedule A)		Secured	
Retirement Plans		Unsecured	
Notes Receivable		Credit Card Balances	
Cash Value of Life Insurance (Schedule B)		Taxes Payable	
Vehicles: (year, make, model)		Life Insurance Policy Loans	
		Mortgages	
		Residence	
		Other	
		Second Mortgage	
Real Estate (Schedule C)		Contingent Liabilities (Schedule E)	
Residence		Other Liabilities (please detail)	
Other			
Other Assets (please detail)			
		Total Liabilities	
		Net Worth (assets less liabilities)	
Total Assets		Total Liabilities & Net Worth	

## Schedule A - Stocks & Bonds

Schedule A - Stocks & Bolius				
Name of issue and Type of security	Where traded	Total value	Pledged	Registered in name of
			Yes No	
_				_

## Schedule B – Cash Value of Life Insurance

Company	Policy#	Face Amount	Cash Value	Policy Loans	Pledged	Beneficiary
					Yes No	
					Yes No	
					Yes No	
					Yes No	

Schedule C – Real Estate									
Location	Present Value		Monthly In	ncome	Name o	n Title	Credito	ır	Outstanding Balance
			<u> </u>						•
			1						
schedule D - Notes Payable	)								
Lender	Original Amount	Prese	ent Balance	:	Maturity	Intere	est Rate		Collateral
		1		+					
		1		+		+			
						_			
schedule E - Contingent Lia	bilities								
				Own	ership				
Other companies you	ı have an equity	inter	est in		entage	Cur	rent inde	htec	lness of entity
other companies yea	a nave an equity	micor	331 111	рого	omage		rom mac	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	111033 01 011111
Do you currently, or have ye	<b>ou ever had:</b> (if yes,	explair	ר)						
udgments		'es							
ax liens		es,							
Pending lawsuits		es							
Bankruptcy Other liens		es 'es							
Mimony/child support/prop		'es							
Settlement obligations		'es							
ettlement obligations	INO	63							
lease list the jurisdictions in v	which you are licensed	to nra	ctice:						
rease list the jurisdictions in v	villeri you are ileerisee	i to pra	ctice						
Signature of applic	cant					Date			<u> </u>
Name of applicant	(please print)								

Law firm name			Contac	ct name				
Address (number, street, city	or town, state, zip co	de)			Suite			
Telephone	Fax		E-mail					
Assets		Amount		Amount				
Cash		Accounts pay	yable					
Cash - IOLTA			Accrued liabilities					
Accounts receivable (du	e within)		Lines of cred	lit (Schedule A)				
30 days			Long term no	otes payable (S	chedule B)			
60 days			Due to partn	er/member				
90 days			Other (pleas	e list)				
120 +days								
Due from partner/memb	oer							
Fixed Assets					<u> </u>			
Real estate								
Leasehold improveme	nts							
Equipment & other								
Accumulated depreciation	on							
Other (please list)								
			Paid in capita					
			Equity - prior	r years				
				distributions/d	raws			
			Current year					
Total assets			Total liabilitie	es & equity				
Schedule A – Lines of credit			Ī	_				
Lender	Original Amount	Present Balance	Maturity Interest Rate (			ollateral		
				1				
Schedule B – Long term not				T	I 6.11.			
Lender	Original Amount	Present Balance	Maturity	Interest Rate	Collat	erai		
				-				
				+				
				1				
Does the law firm currently	have, or ever had p	ending: (if yes, e	explain)					
leadann and a	NI= V							
	No Yes _ No Yes _					_		
	No Yes _					_		
_	No Yes _							
	No Yes _					_		