

B.H. Barkalow, P.C. Client Information Sheet

PROJECT/CASE NAME _____ **YOUR PROJECT #** _____

HOW DID YOU LOCATE US (circle applicable): _____

Directory Listing
(please name)

BHBPC
Website

Internet
Search

Referral
(please list)

CLIENT COMPANY NAME _____

STREET ADDRESS 1 _____

STREET ADDRESS 2 _____

CITY _____ **STATE** _____ **ZIP CODE** _____

PHONE # 1 (_____) _____ - _____ **PHONE #** (_____) _____ - _____

FAX (_____) _____ - _____ **WEBSITE** _____

CONTACT NAME 1 _____

CONTACT 1 PHONE # (_____) _____ - _____ **EMAIL** _____

CONTACT NAME 2 _____

CONTACT 2 PHONE # (_____) _____ - _____ **EMAIL** _____

ASSISTANT NAME _____

ASSISTANT PHONE # (_____) _____ - _____ **EMAIL** _____

DIRECT INVOICES TO _____

ACCOUNTS PAYABLE CONTACT NAME _____

PHONE # (_____) _____ - _____ **EMAIL** _____

FAX# (_____) _____ - _____

ADDRESS (if different than Client) _____