## QUESTIONAIRE FOR POTENTIAL CLIENTS

Name of Caller:		
Telephone Numbers: (H)	(W/C)	
	ASSOCIATION INFORMATION	
Name of Association:		
Location:		
Type of Association:	No. of Units	_
Present Management Services		<del></del>
Monthly Assessment		
Date for Annual Meeting		_
Board Members Required	Current #	
President	_ V. President	-
Treasurer	_ Secretary	-
At Large	_ At Large	-
Board Meeting Requirements	(# of meetings per year, etc.)	
Present Capital Reserves		_
CD's or Current Money Market Accounts		_
Incurance		
Snow	ovider)	

Law Suits		Yes	No	How Many?
Insurance Claims		Yes	No	How Many?
ADDITIONAL INFORMA		+v2		
When can we meet with y	, , ,	,		
Declaration:	_ Bylaws:			
Budget: Cur	rent Financial Re	port:		
KFASONS FOR CHANGE				
What are your top 3 most o				to see done to resolve these
What are you looking for in the world what are your top 3 most consumers:	onsistent issues ar	nd what wo	uld you like	
What are you looking for what are your top 3 most cossues:	onsistent issues ar	nd what wo	uld you like	to see done to resolve these
What are you looking for the What are your top 3 most of the Ssues:	onsistent issues ar	nd what wo	uld you like	to see done to resolve these