

2026 Annual Client Meeting

Client Response Form

Please complete this form during the program and return it to a team member today
If you are participating via Zoom, you may email your form to LeAnn@lifedesignlaw.com or deposit it in your Clio Portal

Your Name(s): _____ Date: _____

1. Client Portal would like a 5-minute Clio for Clients installation call

_____ Please contact me to schedule a 5-minute Clio Portal for Clients installation call

_____ I/We do not need an installation call

2. DocuBank®:

_____ I prefer to keep my DocuBank® membership

3. Promissory Notes and Gifting Memos

_____ I/We need assistance in memorializing loans and gifts I/we have made

Client File Update

(Please Print and return today – thank you!)

Client # 1

Full Name _____

Address _____

Mobile # _____ Home # _____

Email Address _____

Client # 2

Full Name _____

Address _____

Mobile # _____ Home # _____

Email Address _____

Professional Advisors (Please list current Financial Advisor, CPA, Stockbroker, Etc.)

Name: _____ Company: _____

Title: _____ Email Address: _____

Office Phone: _____ Mobile Phone: _____

Name: _____ Company: _____

Title: _____ Email Address: _____

Office Phone: _____ Mobile Phone: _____

Name: _____ Company: _____

Title: _____ Email Address: _____

Office Phone: _____ Mobile Phone: _____

Important People

(Please Print)

Please list Children, Beneficiaries, Trustees and other Helpers

#1

Full Name _____ Relationship _____

Email Address _____ Mobile # _____

Address _____

(Please list any special concerns for this person) _____

☐ Include this person in Law Firm email announcements.

#2

Full Name _____ Relationship _____

Email Address _____ Mobile # _____

Address _____

(Please list any special concerns for this person) _____

☐ Include this person in Law Firm email announcements.

#3

Full Name _____ Relationship _____

Email Address _____ Mobile # _____

Address _____

(Please list any special concerns for this person) _____

☐ Include this person in Law Firm email announcements.

#4

Full Name_____Relationship_____

Email Address_____Mobile #_____

Address_____

(Please list any special concerns for this person)_____

☐ Include this person in Law Firm email announcements.

#5

Full Name_____Relationship_____

Email Address_____Mobile #_____

Address_____

(Please list any special concerns for this person)_____

☐ Include this person in Law Firm email announcements.

#6

Full Name_____Relationship_____

Email Address_____Mobile #_____

Address_____

(Please list any special concerns for this person)_____

☐ Include this person in Law Firm email announcements.

I authorize this information to be updated in my client file.

Signature

Date