

FICA VERIFICATION FORM
ATTORNEYS GENERAL EXEMPTION AND CLIENT INFORMATION
VERIFICATION FORM

1. Name of Client:

Matter Description: Litigation, Voluntary Surrender of Estate

2. What kind of Advice are you providing the client: Legal

3. Client Contact Details

- a. Existing Client No
- b. Would you like to be contacted for Marketing purposes [Yes/No]

For Office use Only

- 1. File Reference Number
- 2. I determined that the general exemption for attorneys applies to this matter [Yes/No]

On what basis does exemption apply? _____

_____ **Date:** _____

(signature)

Name: _____

RESPONSIBLE PERSON

Attach proof of Residence eg. Water and lights account