



PROPERTY EXCHANGE/INVENTORY WORKSHEET

CONFIDENTIAL – For FSI Use Only

Property Exchange

Property Inventory

<i>Form Date:</i>	<i>Court Case # / County:</i>	
<i>Address of Service:</i>	<i>Assigned Agent:</i>	
<i>City/State/Zip:</i>	<i>Assigned Agent:</i>	
<i>Date of Service:</i>	<i>All Forms Received:</i> Yes <input type="checkbox"/>	<i>Adm. Fee Paid:</i> Yes <input type="checkbox"/>
<i>Time of Service:</i>	<i>Hourly Rate:</i>	

CLIENT #1	CLIENT #2
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<i>Name:</i>	<i>Name:</i>
<i>Address:</i>	<i>Address:</i>
<i>City, State, Zip:</i>	<i>City, State, Zip:</i>
<i>Home Phone #:</i>	<i>Home Phone #:</i>
<i>Cell Phone #:</i>	<i>Cell Phone #:</i>
<i>Work Phone #:</i>	<i>Work Phone #:</i>
<i>Email:</i>	<i>Email:</i>

ATTORNEY (Client #1)	ATTORNEY (Client #2)
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<i>Name:</i>	<i>Name:</i>
<i>Address:</i>	<i>Address:</i>
<i>Phone #:</i>	<i>Phone #:</i>
<i>Email:</i>	<i>Email:</i>

Description of Service:



Questions – Concerns – Comments:

SIGNATURE: _____ DATE: _____

Please fill out ALL the above required information. A Guidelines Agreement must be signed and dated by both parties involved prior to FSI scheduling services. All relevant court orders must also be attached.

SUBMIT FORM