

Client interview checklists for professional association formation, binder and EIN

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Easy instructions for the fillable PDF form

This Adobe PDF form lets you electronically fill in the form to print out, reuse, or attach to an email for submission. Visit www.LawyersAidService.com for the most up-to-date version. You must have Adobe Reader version 8 or later for this document to function correctly. Download it [here](#).

The electronic version of the checklist features **key questions**. As you answer the key questions (those having a ⇌), other appropriate questions become active for you. Change your key choices, and different questions become active. Inactive questions will have no active blue boxes.

If filling out electronically, hover your mouse over many blue selection boxes to view a pop-up with information about that question. The last page of the checklist automatically totals your order to make it easier to mail payment simultaneously.

When finished, you can submit your order form by mail, by printing and faxing, or by email. There is also a “Clear form” button on the last page.

Add your further instructions and overflow text in the box on page 5.

Instructions box:

Covered in these checklists

Professional association formation

Section A lets you set up a new Texas professional association, have Lawyer’s Aid check the name availability, create the Certificate of Formation on archive bond, advance the filing fees and submit filing to the State, and help you resolve any problems on the spot. For other entities and filings, see our website, or call (888) 474-2112.

Professional registered agent service

On question 4 of Section A, you can designate Lawyer’s Aid as the company’s registered agent. For peace of mind about handling of legal notices, including lawsuits, a professional registered agent service is recommended. If you choose Lawyer’s Aid, we’ll follow up to get your contact instructions.

Customized binder, slipcase, and embossing seal

In Section B, you can choose to order a customized binder and slipcase, an embossing seal with the professional association’s name, or both. The black vinyl three-ring binder shows the company name in gold on its spine, and stores in a matching slipcase.

IRS Employer Identification Number (EIN)

Section C allows you to order an EIN for the professional association. Lawyer’s Aid deals with the IRS instead of you to get the federal tax ID. You receive the EIN on the SS-4 form usually in 24-48 hours by your choice of email or fax, then mail. If the principle officer’s Social Security Number is not provided, acquisition of the EIN will likely take 2+ weeks.

A. PA formation checklist

(For other entities and filings, see our [website](#))

1. Proposed name for the professional association and two alternatives. Association names must contain associated, associates, association, or professional association, or an abbreviation of those. **Use exact punctuation and spacing.**

2. Type of profession (for purpose clause):

- Joint practice (*If joint, check all that apply. All 1s may form joint practice together, all 2s, etc.*)
- ¹Psychology ²Medicine Dentistry
- ¹Psychiatric nursing ^{2,3}Osteopathy Chiropractic medicine
- ¹Licensed professional therapy ²Podiatry Veterinary medicine
- ¹Licensed professional counseling ³Optometry
- ¹Licensed marriage and family therapy ³Therapeutic optometry
- ¹Clinical social work
- ¹Other licensed mental health profession: _____

↔ 3. Total authorized shares: _____ (optional)
Par value: _____ (optional)

4. Registered agent and registered office **street** address: RA Duties

- a. Lawyer’s Aid Service, Inc., 505 West 15th, Austin, TX 78701 RA Benefits
- b. Other registered agent (*PO box not allowed. If rural, street description plus PO box is allowed.*)

Registered Agent name: _____

Street address: _____

City: _____ State: _____ Zip code: _____

- The RA has consented to serve. (*required*)
- Also file RA’s signed written consent. (*optional free form at LawyersAidService.com/RA*)

5. Initial mailing address (*out-of-state address or PO box allowed*):

↔ 6. Number of initial Members: _____ (*1 is minimum*).

Names and complete addresses of initial Members:

All members must be licensed in Texas to practice the association’s profession.

(attach additional pages if needed, or use Instructions Box on [p. 5](#))

↔ A key question activates other questions for you (continued)

PA formation checklist (continued)

7. The professional association will be governed by: board of directors executive committee
8. Names of the initial Members serving as the **governing authority** (*1 is minimum*):
 All members serve as part of the governing authority.
 Only certain members serve as part of the governing authority. Those members are as follows:

9. ***All initial members must sign the Certificate of Formation. Lawyer's Aid Service cannot sign on their behalf.*** Select a procedure for signature:

- You obtain:** Lawyer's Aid prepares and emails or faxes the customized Certificate to you. You then obtain members' signatures and **email us the signed copy** (or fax to us at (888) 474-4218.)

Your email/fax: _____

- We obtain:** Lawyer's Aid prepares and emails or faxes the customized Certificate **directly to the members**. They sign and return the signed Certificate by email or fax to Lawyer's Aid.

Member 1's email/fax: _____

Member 2's email/fax: _____

Member 3's email/fax: _____

Member 4's email/fax: _____

Member 5's email/fax: _____

Member 6's email/fax: _____

Additional email(s)/fax(es): _____

- Other instructions:

10. What turnaround time and format?

Fastest: form-style filing, in 1-5 business days

Looks most professional: classic legal-document style, in 2-6 business days

11. Add optional special clauses to the Certificate? (*Check all that apply. Call or email for exact text*):

Limited duration: _____ years Delayed effective date: _____

Allow preemptive rights Allow cumulative voting

12. Add your custom clause to the Certificate? No Yes, text attached on [page 5](#)

B. Customized Binder, Slipcase, and Seal checklist

13. Would you like a black three-ring binder, slipcase, and embossing seal customized with the professional association's name? (see [page 4](#) for fees)

Binder, slipcase, and seal Binder and slipcase only Embossing seal None

→ A key question that activates other questions for you

(continued)

C. Checklist for IRS Employer Identification Number (EIN)

☞ To register the new PA with the IRS, a federal requirement, check the box to the left.

All fields are required.

Lawyer's Aid Service obtains your EIN, usually the same day or the day after the PA is formed, and reports it to you immediately. You receive Form SS-4 by mail for your records. To order an EIN for any other kind of business entity, call (888) 474-2112 or see our [website](#).

14. Professional association name *(if already known)*:

15. Street address for tax purposes:

16. Mailing address, if different:

17. Principal member's full name as it appears in Social Security records:

Social Security number: _____ Title: President Other: _____

18. Check this box if you plan to apply for Subchapter S status.

(must file IRS Form 2553 within 75 days to elect this classification)

19. Closing month of accounting year: December (recommended) other:

20. Fill in this box only if there will be employees in the next 12 months:

Highest number of employees expected in next 12 months:

Agricultural: _____ Household: _____ Other: _____

Earliest date wages may be paid: _____

Do you expect to pay \$5,000 or less in wages next calendar year (Jan. – Dec.)? Yes No

21. Type of business or activity (e.g. healthcare, construction, transportation, food service, real estate, retail, etc.):

22. Specific merchandise sold or produced, or services provided:

23. Business phone: _____

24. A Lawyer's Aid Service representative is authorized as third-party designee to obtain the EIN.

25. Notify me of EIN by: fax phone e-mail *(Original is mailed with bill.)*

Fax, phone, or email address: _____

☞ A **key question** that activates other questions for you

(continued)

D. Order form, prices, and contact information

Prices *include* state filing fees, expedite fee, sales tax, and mail/shipping costs. All prices may change without notice.

1. To order, select the services and outfit desired:

PA Formation

Get the quickest turnaround time possible. Lawyer’s Aid checks for name availability; drafts and files the Certificate; obtains the Acknowledgment of Filing; phones, faxes, or emails you with the Acknowledgment (your choice); and mails it with the file-marked Certificate.

Professional Association..... **\$825**

Customized binder, slipcase, and seal

Professionally organize your association’s crucial documents with a custom three-ring binder with slipcase and embossing seal (satisfaction guaranteed).

- Binder, slipcase, and seal **\$45**
- Binder and slipcase only **\$20**
- Embossing seal only **\$27**

Registered agent service, prorated 1st year

When a lawsuit is served, the attorney is called immediately. The citation is sent to you via email, FedEx, or fax, according to your instructions, and then mailed as well.

Cost: \$10 per month left in this calendar year. Future years are \$120..... \$_____

Long name on Embossing Seal

40+ characters/spaces in PA name..... **\$10**

Residential address shipping fee

UPS surcharge applied when delivering Outfit to residential areas **\$10**

EIN service

Lawyer’s Aid obtains your IRS EIN and provides you with a copy of form SS-4

- SSN provided (most common)..... **\$50**
- SSN not provided **\$80**

Federal Express service:

Call (888)474-2112 for options Add \$_____

2. Total for the above services and items selected ...

\$

3. Submit to Lawyer’s Aid Service:

Email to maindesk@LawyersAidService.com **Print and fax to** (888) 474-4218 **Call** (888) 474-2112 to place your order.

4. Submit simultaneous payment:

By credit card via online portal: www.LawyersAidService.com/Payment **Or mail to:** PO Box 848 Austin, Texas 78767-0848

Guarantee

Unless you are thoroughly satisfied with your binder or seal, Lawyer’s Aid Service will replace it or send you a full refund.

Attorney’s name: _____ Phone: _____

Contact name: _____ Phone: _____

Firm name: _____ Fax: _____

Street address: _____

City: _____ State: _____ Zip: _____ Country: _____

Email: _____ Type or sign your name below to confirm you are sending simultaneous payment (required)

E. Your further instructions

Please use this box to:

- Enter any special instructions you have about this order, including overflow text, special clauses, or queries about other services.
- Share your comments, complaints, or suggestions. How can we make things better?
- Tell us how to contact you about this order, if you have a preference.
- Let us know how you heard about Lawyer's Aid. An ad? A person?

If, when emailing, faxing, or mailing in the form, any text overflows the box, please attach it.

Instructions box: