

# New Client Checklist for Virtual Assistants

Date		
Client Full Name		Nickname
Business Name		
Web site		2nd Web Site
Email		2nd Email
Home Phone		Work Phone
Cell Phone		Fax
Billing Address		
Shipping Address		
Referred By <input type="checkbox"/> Thank you sent		
Services Requested		
Needs Assistance With		
Requested More Information On		
Budget		
Estimated Hours Per Month		
Next Steps		
<input type="checkbox"/> Proposal sent	<input type="checkbox"/> Contract sent	<input type="checkbox"/> Contract signed and received
Client Personal Info		
Birthday		Other Important Dates
Interests/Preferences		
Family Info		
Passwords		
Web Site	User ID	Password
Notes		