|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Inquiry** | **Yes** | **No** | **N/A** | **Notes/Comments** | **Note improvements needed & dates for****follow up** |
| **Office Sharing** |
| **1.** If you share office space with someone other than a partner or employee, do you engage in any of the following:**a.** Share stationary with youroffice mate’s name on it? | [ ]  | [ ]  | [ ]  |  |  |
| **b.** Advertise as a full service law firm? | [ ]  | [ ]  | [ ]  |  |  |
| **c.** Advertise as an association of attorneys? | [ ]  | [ ]  | [ ]  |  |  |
| **d.** Place the attorneys’ names on the office door or other signage as if the office mates are partners or members of the firm? | [ ]  | [ ]  | [ ]  |  |  |
| **e.** Refer to each other as partners? | [ ]  | [ ]  | [ ]  |  |  |
| **f.** File court documents as partners? | [ ]  | [ ]  | [ ]  |  |  |
| **g.** Have mutual bank accounts? | [ ]  | [ ]  | [ ]  |  |  |
| **2.** Are precautions taken to preserve client confidences in an office sharing arrangement? | [ ]  | [ ]  | [ ]  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Inquiry** | **Yes** | **No** | **N/A** | **Notes/Comments** | **Note improvements needed & dates for follow up** |
| **Office Sharing** |
| **3.** Do you have a written partnership agreement that addresses what happens if a partner leaves the firm, becomes disabled, dies, or retires? | [ ]  | [ ]  | [ ]  |  |  |