

New Client Form

Company Name _____ EIN or SSN _____

Owner _____ Contact Person _____

Business Address _____ City _____

State _____ Zip _____ Is this also the billing address ___ Yes ___ No

Billing Address(if different) _____ City _____ State ___ Zip _____

Email _____ Phone _____

Type of Business (Industry) _____ Start Date _____

Entity Type ___ Sole Proprietor ___ LLC ___ Partnership ___ S-Corp ___ C-Corp

Accounting Method ___ Cash ___ Accrual

**S-Corp Election Date (Please Provide S-Corp Acceptance Letter from IRS) _____

How do you prefer to be contacted: ___ Email ___ Text ___ Phone call

Owner Information:

1. Owner 1: _____ %Ownership _____

2. Owner 2: _____ %Ownership _____

What are you using to track income and expenses now ___ Quickbooks ___ Xero ___ Other _____

Do you have 1099 Contractors? ___ Yes ___ No

Do you want us to process your 1099 payments as well? ___ Yes ___ No

Do you have employees? ___ Yes ___ No

Do you want us to do payroll or file your Quarterlies and W2s? ___ Yes ___ No

Do you collect Sales Tax and is it current? _____ Pay frequency Monthly Quarterly Yearly

Services you are interested in for bookkeeping purposes:

- Expense Tracking
- Income Tracking
- Bill Pay
- Invoicing
- Sales Tax Prep
- QuickBooks Setup
- Bank / CC Reconciling
- Payroll Services - full payroll or just quarterly filings

Business Bank Accounts: Include bank Name and Account Number and Password

Bank _____ Acct # _____ Password _____

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Bank _____ Acct # _____ Password _____

Business Credit Cards: Include Card Issuer, Username and Password

Credit Card _____ Username _____ Password _____

Credit Card _____ Username _____ Password _____

Credit Card _____ Username _____ Password _____

Square Acct username _____ password _____

Paypal username _____ password _____

Venmo username _____ password _____

Do you sell on Etsy ____ Ebay ____ Amazon ____

Etsy username _____ password _____

Ebay username _____ password _____

Amazon username _____ password _____

Can I access these accounts online to save time?

____ Yes ____ No

Do you have any outstanding business loans?

____ Yes ____ No Loan date: _____ Original Loan Amt _____ Bal _____

Loan date: _____ Original Loan Amt _____ Bal _____

Loan date: _____ Original Loan Amt _____ Bal _____

Is there anything you would like to see different from us that you were not getting from your previous firm
