

BUSINESS INFORMATION SHEET

Business Information:

BUSINESS OWNER(S):					
BUSINESS NAME:		EIN:			
ADDRESS:		PHONE:			
CITY:		STATE:		ZIP CODE:	
EMAIL:					
DATE BUSINESS FORMED:		STATE FORMED IN:			
NATURE OF BUSINESS:					
BUSINESS TYPE:		SOLE PROPRIETOR		LLC	
		C-CORPORATION		S-CORP	ELECTION DATE:
					PARTNERSHIP

PRIMARY AREAS OF INTEREST—click box to select

- | | |
|--|---|
| <input type="checkbox"/> SMALL BUSINESS START-UP

<input type="checkbox"/> BUSINESS CONSULTATION

<input type="checkbox"/> INCOME TAX PLANNING | <input type="checkbox"/> BOOKKEEPING SERVICES

<input type="checkbox"/> INCOME TAX PREPARATION

<input type="checkbox"/> FINANCIAL ANALYSIS |
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