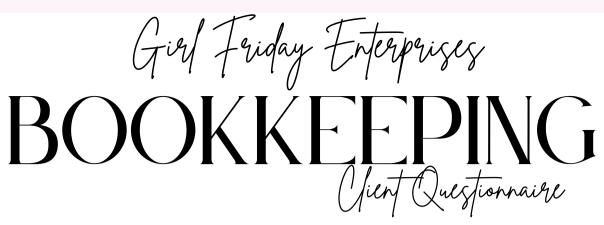


Your Name:
Company name:
Phone Number:
Email Address:
How long have you been in business:
Entity Type: S-Corp Partnership Sole proprietorship C-Corp LLC
Description of product and/or services offered
Do you collect and pay sales tax? Yes No
Do you need payroll services? Yes No
If you need Payroll Services, How many employees?
How many business bank accounts do you have?
How many business credit cards do you have?
How many business loans do you have?
What's your monthly budget?
() \$300 - \$500
○ \$500 - \$750
What services are you looking for?

Is your business	account used	d to pay pe	rsonal expenses?
	Yes	No	
ls your persona	l account use Yes	ed to pay bu No	usiness expenses?
Are your books	current?	Yes	No
Not At AlSomewhMore inv	Desktop S Online lo you want to	be with th I hired a b Quarterly o hly review	e bookkeeping? ookkeeper." r semi annual review
Approximately h	now many tra	nsactions a	re there per month?
25-75			
<u> </u>			
O 151-300			
O 301-500			
O 501-750			
O 751-999			
<u> </u>			
How did you he	ear about us?		



Do you have any fixed assets? Vehicle Building Home					
☐ Other:					
What are your main problems that a bookkeeper could help with (i.e. bookkeeping is a nightmare, little to negative profit, too much debt, not paying yourself, not sure where your business stands financially)?					
Do you collect sales tax?	Yes	No			
Are you current on your sales tax filings?	Yes	No			
Will you need us to file your sales tax?	Yes	No			
Is there anything else you'd like us to know?					