



Deborah I. Daniel, CPA Charter Accounting
 1020 Cambridge Square Suite A Alpharetta, GA 30009
 770-671-0021-office, 770-671-0108-fax

New Business Client Information Request

Business Name: _____

Business Address: _____

Phone Number: _____ Fax: _____

Email: _____

Primary Business Activity: _____

Entity Type LLC Sole-Proprietor Corp S-Corp Partnership Not-For Profit Estate Trust

Federal ID: _____ State ID: _____

Year-End Date: _____ Date Incorporated: _____

Officer (Board of Directors if non-profit) Information

<i>Officer Name</i>	<i>Title</i>	<i>Contact Telephone</i>	<i>E-mail</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Professional Advisors

Please list contact information for your below listed advisors (Name, Firm, Telephone)

Attorney: _____

Insurance: _____

Pension/Retirement: _____

Banker: _____

Current Accountant:(if new client) _____

Accounting Department

Who is the primary contact for accounting information? _____

Phone: _____ Email: _____

Preferred method of contact: _____

What type of accounting software do you use (version, year) _____

Do you produce monthly/quarterly financial statements? _____

Please provide a brief overview of your business goals: _____

Expectations of your CPA

Why are you seeking a new CPA? (if new)

How were you referred to Charetor Accounts Group? (if new) _____

How frequently would you like to be in contact with your CPA? _____

What are your expectations from your CPA?

Please mark all the primary services you would like Charetor Accounts Group to perform:

- | | | |
|---|---|---|
| <input type="checkbox"/> Individual Tax | <input type="checkbox"/> Payroll | <input type="checkbox"/> Tax Planning |
| <input type="checkbox"/> Business Tax | <input type="checkbox"/> Quarterly Financial Statements | <input type="checkbox"/> Business Entity Choice |
| <input type="checkbox"/> Bookkeeping | <input type="checkbox"/> Year-End Financial Statements | <input type="checkbox"/> QuickBooks Training |
| <input type="checkbox"/> Other: | | |
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