



Client Contact Information Sheet

Please complete the Client Contact Information Sheet below. This information will be used to set up your account and to send you monthly reports, tax returns, etc.

I. Company Information:

Company Name: _____
Company Address: _____

Company Telephone: _____
Company Fax: _____
Company Website: _____
Company E-mail: _____
Tax ID: _____ - _____
Entity Type: ☐ S-Corp ☐ C-Corp ☐ Partnership ☐ Disregarded Entity
Industry Type: _____

II. Owner Information: *(If company has various owners, only one is needed)*

Owner Name: _____
Owner Address: _____

Owner Telephone: _____
Owner E-mail: _____
Owner Date of Birth: _____ Owner SSN: _____

In addition to sending Tax Returns, Financial Statements, Sales Tax Returns, Payroll Returns, etc. is there anyone else you would like for us to include in the e-mails, such as Office Manager, Admin Assistant, Owner, etc.? ____ Y E S ____ N O If Yes, please fill in below:

E-mail 1: _____
E-mail 2: _____
E-mail 3: _____

By signing below you authorize us to use all the contact information above for all necessary purposes.

Print Name: _____ Title: _____ Date: _____

