



Client Name: _____

Company Name: _____ Date Business Started: ____/____/____

Address: _____

Phone: _____

E-mail: _____

Entity Type: _____

If LLC did you file form 8832? _____,
(Please provide copy of Form.)

S-Corp: _____, (Please provide copy of Form 2553.)

EIN Number: _____

Accounting Software used: _____

GENERAL QUESTIONS:

1. Are your tax return filings up-to-date? ____ Date last filed: ____/____/____
(Please provide date of last income filing.)

2. Are you interested in tax planning services? _____

3. Do you pay payroll? _____

Do you outsource payroll? _____

Are you enrolled in the IRS EFTPS? _____

Are enrolled in FDOR On-line File & Pay? _____

Payroll tax deposits up-to-date? _____

4. Do you use check registry? _____

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5. Do you need monthly or Quarterly Service? _____

6. Do you use your personal car for business? _____

Do you keep track of the mileage? _____

7. Do you need assistance with financial statements? _____

8. Would you like to have Custom Reports to analyze your business?

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