

BOOKKEEPING/WRITEUP CLIENT QUESTIONNAIRE

Company Name:	
Address:	
Contact Person:	
Title:	
Tel:	
Email:	

Since when have you been in business?	
Description of product and/or services offered:	

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Locations:	
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What type of company do you own? (S-Corp, C-Corp, LLC or are you a sole owner)	
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Sales Tax:	
· Do you collect and pay sales taxes to the state?	
· Do you sell products online or via retail stores?	

Payroll Taxes/Processing	
· How many employees do you currently employ?	
· Who processes your payroll? (ADP, Paychecks or in-house)	

Do you have partners, investors, family members in the business?	
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Do you have a succession planning (buy/sell agreement, exit strategy)?	
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What is your business average monthly sale?	
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Do you pay personal expenses from your business bank accounts?	
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How many business bank accounts do you have?	
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How many business credit cards do you have?	
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How many business loans do you have?	
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Does your business have A/R? If so, how do you track it? (excel, software, other)	
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Equipment - Describe the equipment, request depreciation schedule
List any business leases:
List Cash payments made to vendors or officers
Owner Compensation - Describe
Contractors: List Major contractors
Liability Insurance (WC, Property & Casualty, Liability)
Other Insurances (Life, Disability Voluntary Benefits)
Describe type of retirement plan in place:
Do you have legal directives (Wills, Durable POA, Living Will, Health Care Proxy)?
Do you have an Estate Plan (Trust)?
Do own Real Estate?
Bank Accounts - List Bank Accounts – See attached
Notes:

