DATE:	FILE CABINET ID
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## Payment is due at the time services are rendered

## **BUSINESS INFORMATION**

Name:	Federal ID #:					
Type of Entity: (circle one) Corporation:	C S	Partnership:	LP	_GP T	Γrust	SMLLC
Physical Address:						
Mailing Address:						
Phone: ()						
Is an EFTPS account already established? _						
Bank Name:	•					
Contact Person:	_					
Email Address:						
Referred by:						
BUSINESS OWNER/PARTNER INFOR  Name:  Driver's License #: **	MATION:		its  Birth:			
Address:						
City, State Zip:(work)Email Address:		(Cell) _	m):			
Title:						
BUSINESS OWNER/PARTNER INFOR	MATION:					
Name:		SS#: **				
Driver's License #: **	Ex Date:	Date of l	3irth:			
Address:						
City, State Zip:		Phone (h	ım):			
(work)		(Cell) _				
Email Address:						
Title:						

As a new client with Baity & Assoc., we want to ensure we are providing for all your personal or business needs. Please mark the areas below that you have questions about, or would like information on:

 Bookkeeping
 Quarterly payroll reporting, W-2's & 1099's
 Financial Statements
 Tax preparation: Individual, Corporate, Partnership, Trust, Estate, Gift, and Non-profit Organizations
 Personal Property Renditions
 Vehicle Renditions
 Tax planning and consulting
 Formation of a business (Inc., LLC or LP – with our Legal Affiliates)
 Dissolution of a business (Inc., LLC or LP – with our Legal Affiliates)
 IRS resolution - tax issues between Internal Revenue Service and the taxpayer
 State of Texas resolutions – issues between State of Texas and taxpayer
 Sales Tax
 Notary public services
 QuickBooks <sup>TM</sup> set up for a business
 QuickBooks <sup>TM</sup> training for staff
 QuickBooks <sup>TM</sup> on-site / in house / remote analysis