

BUSINESS CLIENT DATA SHEET

Date Completed ___/___/___

Business Name _____

Street Address _____

City _____ State _____ Zip _____

Phone: Work (____) ____ - ____ Cell (____) ____ - ____ Home (____) ____ - ____

Email Address _____@_____.

Website Address _____

Federal Tax I.D. _____ State Tax I.D. _____

State U.I. No. _____

Date Business Entity Was Created ___/___/___

Type of Entity ___ LLC ___ Partnership ___ Corporation ___ Proprietorship

Tax Form ___ 990 ___ 1040 ___ 1065 ___ 1120 ___ 1120S

Ownership Information

Owner Name	%	Title	Home Address	Home Phone	SSN
_____	___	_____	_____	(____)____-____	____-____-____
_____	___	_____	_____	(____)____-____	____-____-____
_____	___	_____	_____	(____)____-____	____-____-____
_____	___	_____	_____	(____)____-____	____-____-____

Other Information

Other Contacts:

Phone / Email/ Other:

Remote Login Information:

Other Information: _____
