

Client Preliminary Questionnaire

Please help us get to know your needs better. Fill out this form to the best of your knowledge.

Business Name:	Owner's Name:		
Type of Business:	Product/Service:		
Business Address:	City:	State:	_ Zip Code:
Home/Office Phone:	Cell:	E-	·mail:
Website Address:			
Date of Business Formation://	Date Started:/	/	
EIN: If	other, please descri	ibe:	
Describe your business in the space below	/ :		
Year Founded: Years of Manage	ement Experience:_		
How many employees do you have?	Are any part	time? If yes	, please list #:
Annual Sales/Revenue: Annual	Payroll:		
Date Bank Account 1st Opened:/	/ Date Started	: / /_	
How do you keep the Books now? O In-he	ouse Bookkeeper O	Use any a	ccounting software
Have you ever owned any other businesse	es in the past?	O Yes O I	No
Do you have a business other than this on	e?	O Yes O I	No
Number of Bank Accounts			
Number of Transactions per Bank Accoun	t Checks De	ebit Card _	Cash Withdrawals
Do you use personal credit card or person	nal funds for business	expenses?	?
How many locations? How many of	decision makers?	Numb	er of Employees
Location of Business Records			

Do you hold interest in any other business/operations? If so, please describe below:
What states does your business operate in? Please list all of them on the line below:
Did you face any losses/claims within the last 5 years? If so, please describe below:
On a scale of 1-5, with 1 being poor and 5 being great please answer the following question.
How technologically oriented are you in the following? • QuickBooks • Internet in General • Remote Access (logmein, etc.) • Research (Google, etc.)
What is your Outlook on the Business? Please circle (Positive, Hopeful, Excited, etc.) Other (please explain):
What are your sales? Is your business profitable? How much money per month do you need to meet all of your business expenses? \$ Do you have Goals/Projections (Sales, Growth, etc.)? Please explain:
Are you looking to stabilize your business or streamline operations? Are you looking to grow your business? (How?)(Plans?)(Strategies?)