Account4-ME Client Profile

Let's get going!

Entity Name/Legal Name *					
Federal Tax Identification Number					
Principal Place of Business *					
Street Address					
Street Address Line 2					
City State / Province					
Postal / Zip Code					
State of Organization *					
Type of Business Entity *					
Sole Proprietorship	Partnership				
Limited Liability Company (LLC)	C-Corporation				
S-Corporation	Not-for-Profit				
Unknown					
What services are you seeking? *					
Getting going - new startup					
Help with company set up of books					



Help maintaining existing books					
Financial Reporting					
Cash Management					
Budgeting					
Tax Preparation					
Payroll					
Financial Review					
Special Project					
Contact					
The information must belong to authorized contact person of the entity.					
Name *					
First Name Last Name					
Address *					
Street Address					
Street Address Line 2					
City State / Province					
Postal / Zip Code					
Work Phone Number *					

1 JotForm

Cell Phone Number

Area Code Phone Number Email * example@example.com **Company Ownership** Number of Partners/Owners * **Partner #1** Name First Name Last Name **Address** Street Address Street Address Line 2 State City Zip Code



Phone Number						
Area Code	Phone Number					
Email						
example@example.com						
Ownership Percentage						
Payroll						
Complete if your compa	any has payroll					
Do you have Payroll?	*					
Yes		No				
Sales Tax Inform	nation					
Do you file Sales Tax?	•					

Yes No

Accounting Software & Method

Accounting Software Used

Quickbooks (Desktop) Quickbooks Online

Other Unknown

Accounting Method Used *

Cash

Accrual

Unknown / Unsure