

Business Client Information Sheet

Thank you for selecting Wood Accounting Services LLC to assist you with the preparation of your tax return. Unless authorized by law, we cannot use your tax return information for purposes other than the preparation and filing of your tax return. Your consent would be obtained in writing.

Business Name _____ Start Date _____

Legal Form _____ Profit Type _____ EIN _____

PA Revenue ID _____ Fincen/BOI # _____

Email _____ Phone Number _____

Business Address _____

Tax Return Type _____ Accounting Year End Date _____ Accounting Method _____

Tax Return Normal Due Date _____ Sales Tax Number _____

Consent To Disclosure of Tax Return Information from: _____

Do we have Tax Form? Yes No

Responsible Party _____ Responsible Party Telephone _____

Directory of Members/Partners

Name	DOB	SSN	Address	Phone #	%	Date Acquired

I am signing this form certifying that the information is correct to the best of my knowledge

Responsible Party _____ Title _____ Date _____