

WALTON'S TAX DOING MORE, LLC**706-524-7898****Check if applicable:** ☐ Sole Proprietorships ☐ Limited Liability Co. (LLC- Sole) **Accounting Method:** ☐ Cash ☐ Accrual

This is an agreement between Walton's Tax & Accounting Services and "You", being owner or authorized person that all information provided about your business is accurate and true. Please furnish, for the _____ tax year financial statement(s), schedule of source(s), or document(s) with amounts of income and nature and amounts of expenses. When declaring income and expenses on a tax return, evidence should be submitted for verification. If you have evidence, write **ATTACHED** across the form below. Keep all records for at least 4years. If you do not have documentation with you at the time of the tax preparation, you must fill out the form below

Please note: If you are audited by the IRS or State Department, you must be able to submit documentation that substantiate your filing.

Gross Receipts: _____ **Type of business:** _____ **EIN (Fed ID#)** _____

Business Name/DBA _____ **State Withholding#** _____

Address _____ **City** _____ **State** _____ **Zip** _____ **State** _____

Income & Expenses: _____ **Sales Tax#** _____

Item	Total	Expenses	Cost	Goods Sold	Cost
Receipts from Sales/Services		Rent or Lease (Vehicle, Equipment, Building)		Beginning Inventory	
Cash/Check		Vehicle Expenses		Purchases for Inventory	
Trade of Services/Other		Total Miles		Items used personally	
Returns/Allowances		Business Miles		End of Year Inventory	
Total Income		Office Utilities		Expenses cont.	
Expenses	Cost	Office Expenses		Wages	
Advertising		Licenses		Education/Seminars	
Interest (Bank, Loan Mortgage, etc)		Legal and Professional Services		Estimated Tax Payments	1 st Qtr. 2 nd Qtr. 3 rd Qtr. 4 th Qtr.
Commissions and Fees		Travel		Client gifts	
Contract Labor (1099 or misc.)		Meals and Entertainment		Misc Expenses:	
Insurance (other than health)		Supplies (other than for office)			
Health Insurance		Repairs and maintenance (Vehicle, Equipment, Building)			
		Taxes (Payroll, other)		Grand Total Expenses	

Your signature on this form verify to tax preparer that this is your business or you are authorized with this business to give information on their behalf and you are entitled to file taxes as a business owner or authorized person.

Business Owner/Authorized Person Print Name

Signature

Date