



# Caledonia Tax & Accounting PLLC

## Timothy Noyes, CPA

### NEW CLIENT INFORMATION FORM

#### Personal Contact Information

Full Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

Occupation: \_\_\_\_\_ Spouse Occupation: \_\_\_\_\_

Address: Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Your E-mail: \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ Work E-mail: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Spouse E-mail: \_\_\_\_\_

Primary contact person for tax-related matters? \_\_\_\_\_

Preferred PHONE and EMAIL to be used? \_\_\_\_\_

Best time to call? \_\_\_\_\_

Filing Status: Single \_\_\_ Head of Household \_\_\_ Married/Joint \_\_\_ Married/Separate \_\_\_

Your Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Spouse Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Your SS# \_\_\_\_-\_\_\_\_-\_\_\_\_ Spouse SS# \_\_\_\_-\_\_\_\_-\_\_\_\_

#### Dependent Information

1. Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

SS#: \_\_\_\_-\_\_\_\_-\_\_\_\_

3. Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

SS#: \_\_\_\_-\_\_\_\_-\_\_\_\_

2. Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

SS#: \_\_\_\_-\_\_\_\_-\_\_\_\_

4. Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

SS#: \_\_\_\_-\_\_\_\_-\_\_\_\_

How did you hear about us? \_\_\_\_\_

Referred by: \_\_\_\_\_

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# Caledonia Tax & Accounting PLLC

## Timothy Noyes, CPA

### Business Client Information

Company: \_\_\_\_\_ EIN: \_\_\_\_\_ - \_\_\_\_\_

Business Address: Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Business Website: \_\_\_\_\_

Business Phone: (\_\_\_\_) \_\_\_\_\_ Business E-mail: \_\_\_\_\_

Company Bookkeeper: \_\_\_\_\_ Bookkeeper Contact Info: \_\_\_\_\_

Member/Partner: \_\_\_\_\_ % Member/Partner: \_\_\_\_\_ %

Member/Partner: \_\_\_\_\_ % Member/Partner: \_\_\_\_\_ %

**Service(s) Requested:** \_\_\_\_\_

**Taxed as:** Partnership\_\_\_\_ Corporation\_\_\_\_ S-Corp\_\_\_\_ Single Member LLC\_\_\_\_

Sole Proprietor\_\_\_\_ Nonprofit\_\_\_\_ Other\_\_\_\_

QuickBooks backup? YES\_\_\_\_ NO\_\_\_\_

QB Login name: \_\_\_\_\_ QB Password: \_\_\_\_\_

Are you interested in Remote Access options? YES\_\_\_\_ NO\_\_\_\_

Notes: \_\_\_\_\_

### General Reminders

**Individuals and Businesses:** please provide a complete copy (Federal, State, Local) of your prior year's tax return.

**Businesses:** please provide a copy of your Organizing Documents, referred to as your "Permanent File", including your Articles of Organization, Official IRS Correspondence (EIN, S-Corp Election), and other initial business/employer registration filings (Fed, State, Local, Employment Tax Registration, etc.)

### Notes/Comments