

Client Information Sheet – Business

Officer Information/ Tax-Matters Partner/Shareholder

Officer First Name: _____

Officer Last Name: _____

Officer Title: _____

Officer Date of Birth: _____

Percent Ownership: _____

Business E-Mail Address: _____

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Did you receive PPP loans/EIDL/or other small business loans due to Covid-19?

How much was received: _____

What Type: _____

How did you hear about us?

Referral: _____

Something Else: _____