

New Client Data

Date: _____

Referred By _____

Services Menu (Please Choose)

Sales Tax _____

Tax Preparation (Business) _____

Payroll Services _____

IRS Problems _____

Consultation with CPA _____

Other Services _____

Business Address _____ Suite. No _____

City _____ State _____ Zip Code _____

Business phone _____ Cell Phone _____

Email _____ Fax # _____

Owner 1:

Last name _____

First name _____

Middle initial _____ Suffix _____

Social Security No _____

Occupation _____

Date of birth _____

Work Phone _____

Address _____

City _____

State/Zip code _____

Owner 2:

Last name _____

First name _____

Middle initial _____ Suffix _____

Social Security No _____

Occupation _____

Date of birth _____

Work Phone _____

Address _____

City _____

State/Zip code _____

Maplewood Office

Phone 973-762-7299

Fraser CPA/Taxko

Fax 973-762-7292

Bloomfield Office

Phone 973-748-7100

Fax 973-748-7343

Newark Office

Phone 973-991-1891

Fax 973-991-1892