



# Small Business Accounting Professionals

One-Stop Small Business Solutions

Sr.Accountant: Tracy Alvares, CMA  
Direct Line: (403) 269-7227  
Assistant:  
Direct Line:  
Our File:  
Your File:

Primary Contact: \_\_\_\_\_

Business Name: \_\_\_\_\_

Home Address:

Business Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Bus. Phone: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_

S.I.N.: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Bus. Fax: \_\_\_\_\_

Referred By: \_\_\_\_\_

Bus. E-mail \_\_\_\_\_

**Additional Partners ( Include name, Birth date and SIN #'s)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Marital Status:** \_\_\_\_\_  
*(Include name, date of birth, SIN #)*

Incorporation Date: \_\_\_\_\_

GST Method: \_\_\_\_\_

Business Y/E Date: \_\_\_\_\_

Frequency of filing: \_\_\_\_\_

Last F/S completed by: \_\_\_\_\_

Follow Up: \_\_\_\_\_

**Documents Obtained:**

- Privacy Consent
- Registered GST
- Minute Book
- CRA Consent
- Business Number \_\_\_\_\_
- Engagement Letter \_\_\_\_\_
- Consent to share with SBLC
- Other

**Main activity of the business:**

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**Office location:**

- In the home**  
Sq. footage of home \_\_\_\_\_  
Sq. footage of office \_\_\_\_\_
- Separate location**  
 Owned Year Purchased \_\_\_\_\_  
 Rented Rent Amount \_\_\_\_\_

**Does your company:**

- Carry Inventory? \_\_\_\_\_
- Purchase items for resale? \_\_\_\_\_
- Have any expenses or contracts? \_\_\_\_\_
- Purchase repair & maintenance items? \_\_\_\_\_
- Have computer purchases? \_\_\_\_\_
- Have Payroll or Contractors? \_\_\_\_\_
- Give dividends? \_\_\_\_\_
- Use a Corporate Credit Card? \_\_\_\_\_
- Mix personal and corporate expenses? \_\_\_\_\_
- Have unrelated shareholders? \_\_\_\_\_

**Notes:**