

CORPORATION INFORMATION SHEET

Primary Contact

Name: _____ SIN: _____
 Phone: *(business)* _____ Fax: _____
 Phone: *(cell/home)* _____ Email: _____
 Personal Address: _____
 Preferred method of communication: Phone Email Postal Code

Secondary Contact

Name: _____ Phone: *(business)* _____
 SIN: _____ Phone: *(cell/home)* _____

Business Information

Business name: _____
 Business address: _____
 Business Website: _____
 Business phone: _____ Business Fax: _____
 Year-end date: _____ Bank Information: _____
 CRA Business number: _____ Prior Accountant: _____
 Lawyer Information: _____

For office use only:					
Engagement Required:	Compilation	Review			
Other Services:	T1	T4	T5	T5018	GST
Added to SAGE?	<input type="checkbox"/>	Create CW File?	<input type="checkbox"/>	Courtesy letter sent?	<input type="checkbox"/> Date sent: _____
Added to Doc.it?	<input type="checkbox"/>	Create green file?	<input type="checkbox"/>	Initial:	Date:
Added to Corp Y/E list?	<input type="checkbox"/>	Legal docs. to perm?	<input type="checkbox"/>		
Added to Outlook?	<input type="checkbox"/>				