



ENTITY INFORMATION FOR		TAX RETURNS	
Date:	Tiı	me:	Tax Form:
New Client:	Y or N	EIN:	
Entity Name:			
Mailing Address:			
			Zip:
			Zip:
			Cell Ph #
			Cell Ph #
Liliali Address.			
CIRCLE all that apply		nolder-Director-Member rustee-Beneficiary	Officer-Shareholder-Director-Member Partner-Trustee-Beneficiary
Name			
Street			
City/State/TX			
Allocated %			
SSN			
*List additional partner	s/trustees/benefi	ciaries on back	
1) Any SBA Loans	s, Grants, Payro	oll Protection (PPP) re	eceived: Y or N
2) Do you have Bu IF YES: Is	usiness Assets: \ s Rendition Form	or N from County Appraisal	District Enclosed: Y or N
		r tax preparation	
(Any ch	nanges, includi	ng assets, or future	plans)





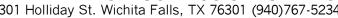


CIRCLE all that apply	Officer-Shareholder-Director-Member Partner-Trustee-Beneficiary	Officer-Shareholder-Director-Member Partner-Trustee-Beneficiary
Name		
Street		
City/State/TX		
Allocated %		
SSN		

CIRCLE all that apply	Officer-Shareholder-Director-Member Partner-Trustee-Beneficiary	Officer-Shareholder-Director-Member Partner-Trustee-Beneficiary
Name		
Street		
City/State/TX		
Allocated %		
SSN		

ADDITIONAL INFORMATION / NOTES:		







Entity Name:
Full Address:
Phone #:
Dear Taxpayer,
Thank you for choosing our firm to prepare your income tax returns for tax year This letter confirms the services we will provide.
We will prepare your federal and state returns for tax year based on information you provide. We will exercise the utmost care in utilizing the tax code available to prepare a true and accurate tax return based on the information you provide. Although our work will not include procedures to discover irregularities or inaccuracies in the tax data you provide, we may ask for clarification of certain information, or additional information.
It is your responsibility to provide all necessary information related to income and deductions for tax year, and to respond to our inquiries in a timely manner so that we can accurately complete your returns by the appropriate due dates. You are responsible for maintaining appropriate records, such as official tax documents you receive, receipts, cancelled checks and any other substantiation for your deductions, and purchase and sales information for assets.
It is your responsibility to review your tax returns before they are filed to determine that all income has been correctly reported and that you have substantiation for your deductions. It is also your responsibility to return all signed and dated documents in a timely manner as to ensure your returns are submitted by the due dates.
If your returns are later selected for review or audit by taxing authorities, we will be glad to assist or represent you if you desire. Our fees for preparing your returns do not include time that might be necessary to assist you during a taxing authority review. Our fees for preparation of your returns are based upon our standard billing rates plus out-of-pocket expenses. Our invoices are due and payable upon presentation of the tax return. There will be an additional fee of \$25 for any returned checks.
If this letter accurately summarizes your understanding of our agreement relating to the preparation of your tax returns, please sign, date and return it to us. Thank you again for choosing our firm to prepare your tax return. We appreciate your business.
Sincerely,
Vinny Lewis' Business Solutions
Accepted by:
Printed Name
Signature
Date





REPRESENTATION REASSURANCE OPTION

Please review and indicate which option you prefer:

representation service any representation ser	nave the optional charge added to my some some and tax year. This one-time and vices (excluding audits) I may require wis' Business Solutions.	nual charge of \$50.00 will cover
Print Name	Taxpayer's Signature	Date
Preparer's Initials	Date	
services needed for my	line the annual representation fee. I i	
hourly rate of \$95.00/	hr which I will be responsible for.	
Print Name	Taxpayer's Signature	Date
Preparer's Initials	Date	