

# All in One Tax Services

## LLC Client info Sheet

### Set up Requirements:

- **Fee \$100.00** Covers LLC Certificate of Filing with the State of Texas and Employer IN (SS-4) if needed.

### Tell us a little about your business:

Entity Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if differs): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Fax: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Type of Business (Industry): \_\_\_\_\_

Date you started: \_\_\_\_\_

### All Members involved:

1 Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Driver Lic No: \_\_\_\_\_ DOB: \_\_\_\_\_

Director/Managing Member? Yes/No

2 Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Driver Lic No: \_\_\_\_\_ DOB: \_\_\_\_\_

Director/Managing Member? Yes/No

3 Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Driver Lic No: \_\_\_\_\_ DOB: \_\_\_\_\_

Director/Managing Member? Yes/No

4 Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Driver Lic No: \_\_\_\_\_ DOB: \_\_\_\_\_

Director/Managing Member? Yes/No

For Single Member LLCs, would you like to be viewed by IRS as a Full Corp or Small Corp? \_\_\_\_\_ (8832 - \$35.00 form Charge)

Number of Employees: \_\_\_\_\_

Payroll Start Date: \_\_\_\_\_

Will you charge Sales Tax: Yes/No

Will you report to TABC? Yes/No

Do you want All in One to be your Registered Agent? Yes/No

(Office use only)

EIN: \_\_\_\_\_ TID No.: \_\_\_\_\_

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