

CORPORATION

INFORMATION SHEET_____ TAX YEAR

PLEASE PRINT CLEARLY SO ALL INFORMATION CAN BE EASILY READ

1120 CORP:	1120	S CORP:			LLC.	·
Employer Identification Number:			Date of Incorporation:		/	_/
Business Name:						
Doing Business as:						
Change of Address: Y N						
Address:			Suite #			
City:			State	Zip co	de	
Cell/Work Phone:	Ext: _					
Fax Number:	E-Ma	ıil:				
	SS #	Address			Title	
By signing below, you understand your cormake sure that you understand how it is propresented with your completed tax return, material facts and income. We value your	epared, & to make please review all in	sure you receive to formation to make	he great service you e sure that there are i	expect from our	compan	y. When
<u>s</u>	TATEMENT OF U	NDERSTANDING	G FOR CORPORA	<u>IIONS</u>		
You have chosen the professionals at the year 2023. In doing so, you are pe expenses, etc.) & that your corporate completion of your tax return. We will receive additional information after w services in filing the required amended is a state return involved with the ame amended return.	rsonally telling us tax return is ready not be able to eee file your return, direturn, we will be	that you have re y to be filed. Ple file or release yo this document is e charging you	eceived all your tax ease be aware tha our copies until all p s your official notific a minimum of \$200	k information (F t payment is do payments are c cation that sho of for this addition	P&Ls, 109 ue upon collected uld you r onal servi	9s, d. If you request our ice. If there
All clients will be given one copy of the happily provide them to you; howeve for 2 years or more, there will be a \$25 supporting documents for a period of you or a third party. You should keep y	r, there will be a \$ charge per copy 5 years. Proof of	55 charge per co per year of pa identification wi	opy per return. If you take tax years. We re Il be requested bet	ou have not be tain copies of y fore tax informa	een a cli our tax i	ent of ours return and
E-File Tax Services of Nevada, Inc wants to Services of Nevada, Inc is required to act, I undersigned will be responsible for any and	espond &/or appe	ar for a depositior	, court hearing &/or	for any other leg	al matter,	, the
If you have read & understand the	=	sign and date	below.	Date:		
Signature:				Date:		



PRICE: \$100.00 ____ACCEPTS FOR TAX YEAR 2024

CORPORATION IRS ASSISTANCE ASSURANCE (CIAA)

____DECLINES FOR TAX YEAR 2024

ENTITIE'S NAME TAX PREPARER'S PRINTED NAME	OFFICER/MEMBER'S SIGNATURE TAX PREPARER'S SIGNATURE	DATE		
ENTITIE'S NAME	OFFICER/MEMBER'S SIGNATURE	DATE		
we have reviewed the letter, we will inform you requested by the IRS/State and/or doing an an a response letter/s to the IRS/State. (Fees mentional Supporting DOCUMENTS must be given to information omitted at the time of your tax prepared	the Tax Preparer at time of the tax preparation to vo paration is not the fault of the Tax Preparer & the CIA g is given to the Tax Preparer at the time of service &	ude; paying the amount of \$200+) and/or writing allidate all claims. Any will not be		
If the IRS audits you, we will assist you in answering questions regarding the preparation of your return, help you organize your receipts & guide you in what is required to face the IRS. (Fees mentioned above will apply without CIAA)				
IRS ASSISTANCE:				
WHAT THIS PROTECTION PROVIDES YOU:				
		•		
tax agencies for tax return/s prepared by charge a minimum of \$100 for IRS letter rev	tance, reviewing IRS letters and responding to E-FILE TAX SERVICES OF NEVADA, INC. Without view, \$100/hour for IRS Insurance assistance ar cal tax agency, which you, the client, would b	this protection, we will		