Rawluk®Robert					
CHARTERED PROFESSIONAL ACCOUNTANTS					
BUSINESS CLIENT INFO SHEET & CONTACT DETAILS					
Documents to be signed via Receipt of Financial Statement Package		☐ Tax Cycle ☐ Tax Cycle	Email Hard Copy Email Hard Copy		
		Client Information			00093
Legal Name:					
Operating Name:					
Business Number:	Year-end date:				
Address	City				
Province	Postal Code Business #				
Cell Number	Fax #				
Email Address:					
Shareholder Information					
Name of Shareholder(s)		Business/Partnersh Number(s)	iips SIN	% Common Shares	% Preferred Shares
Who has signing authority					
Letter to Lawyer For all our clients we prepare a letter to the lawyer to assist with keeping the minute book up to date. Would you like us to send this letter to your lawyer? Yes No					
Name of Lawyer					
Address	City				
Province	Postal Code				
Other					
Would you to be added to our newsletter mailing list?					
How did you hear about us?					
FOR OFFICE USE ONLY - Requested Services Audit Review Compilation					
Bookkeeping	Monthly	Quarterly	🗌 Annu	ally	
Payroll Services	U Weekly	Bi-Weekly	Twice	Twice Monthly Monthly	
GST/PST Services	Monthly	Quarterly	🗌 Annu	ally	

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Please forward completed document to admin@accountants.mb.ca