



ACCOUNTING & TAX SERVICE AGREEMENT

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Client Information

Company _____

IRS EIN _____ or Please get one for us

Address _____ Phone _____

City ST Zip _____

email _____

Owner / contact _____

The purpose of this agreement is to ensure a complete understanding between us. It will describe the scope and limitations of the services we will provide for you. I will be the contact person for this engagement.

Initial Set Up, What We'll Do

We will assess the

Accounts on your balance sheet and income statement Bank Reconciliations
Payroll ledgers Subsidiary ledgers Transactions to date
...and if you don't have these, don't worry; we will create them for you.

If you are behind on your sales tax, payroll tax, or IRS filings; we will get you caught up. If needed, we can request historical tax forms from the IRS or State agencies to see exactly where we are.

We will add you to (or move you to) our Wholesale Billing Account at QuickBooks Online (QBO) so you never have to pay them or update software ever again. This will include their state of the art payroll if you need it.

Then, we will balance your general ledger to your subsidiary records and bring the system into compliance with Generally Accepted Accounting Principles; so it is capable of proper tax recordkeeping. If you are already using QBO we will make or make suggestions for improvement in areas where we see errors and improper use of QuickBooks Online. We will also identify areas where you may not be utilizing the software to the fullest. These include customizing reports and forms, changing QBO preferences, and adding features such as class or location tracking. We will answer your questions on the software and provide personalized training as needed.



What We DON'T Do

We do not at any time provide legal services of any type. We have not been requested to discover errors, misrepresentations, fraud, illegal acts, or theft, and therefore, have not included any procedures designed or intended to discover such acts, and you agree we have no responsibility to do so.

What We Need from You

For Monthly Bookkeeping Services, **you will be required to login to your bank thru QuickBooks Online.** We WILL NOT have access to your money. We will NOT have a record of your password. This will only allow us to download the exact same information that we could see on the bank statements. The only way we can offer discounted prices is to automate our processes. Call if you have questions about this.

Also, during initial set up, we will need to obtain items such as (if available) your existing QuickBooks data file (or similar software) and supporting documents such as check registers, bank statements, uncollected customer invoices, sales ledgers & receipts, purchase orders & unpaid vendor invoices (aka "bills"), and complete payroll information. Other items needed by us include 'answers to our questions' and 'any other information' that we may require to complete the work of this engagement. These items and any other items that we obtain from you will be based on information provided by you and will be used without any further verification or investigation on our part. See also the New Client Checklist included.



On a monthly basis

We must receive your bank statements as soon as possible with check images. If we cannot tell who the check is payable to, we will need to get that information. NOTE: Again online access to bank accounts, are a requirement for the discounted rates of this proposal. If manual data entry is required, it will be billed at our clerical hourly rate. This will be communicated to you in advanced of the work being done.

Included in the monthly fee

We will reconcile your bank and investment accounts (up to 5). Process your sales tax report and payment(s).

Review your payroll reports from QBO or other payroll processor and make adjustments to the accounting records as needed.

Review and deliver pdf's of monthly financial statements to you by the 20th via email.

We will be your business coach to help you achieve long term success by offering 1 hour per month (non-cumulative) of addition accounting work, consulting, or clerical service. Just call.

As needed CFO Services

Reports as needed for loan applications.

Long-term budgeting and (for management only) forecasting.

Reporting to Boards.

Compliance reporting.

Capital planning.

Cash flow analysis.

Government bidding qualifications.

Business plan development.

Full-Service Accounts Payables/Accounts Receivable

Has your business grown, but not quite enough to justify hiring you own – or additional office staff?

We are here to help. Just drop your paperwork by our office (or scan/email, text a pic) and we will print checks to pay your bills or prepare and send invoices to your customers.



Annually we will

Prepare annual financial statements by March 1st of each year. Issue any annual 1099's and the annual property tax rendering.

W-2, W-3, 941, 940, and State U/E reporting will be done by QB Payroll.

We will be your business coach to help you achieve long term success by offering 1 hour per month of addition accounting work, consulting, or clerical service (non-cumulative).

AND AT NO ADDITIONAL CHARGE, we will prepare your annual business & personal state + federal income / franchise tax returns.

When We'll Do It

The initial set up is estimated to be completed in 30 days.

Monthly work WILL be completed by the 20th of the next month (or next business day if 20th is not) or 10 business days after receipt of the end of month bank statement (whichever is later).

Annual work for monthly payers will be completed by March 1st of the next year.

Hardware and Software Warranties

During the course of the engagement, we may recommend a purchase and installation of computer or technological hardware, software, communications, or services by your company. Warranties, to the extent they exist, are provided only by the manufacturer/vendor of those computer products.

Services Outside the Scope of this Letter

You may request that we perform additional services at a future date not contemplated by this engagement letter. If this occurs, we will communicate with you regarding the scope and estimated cost of these additional services. Engagements for additional services will necessitate that we issue a separate engagement letter to reflect the obligations of both parties.



Fees *

Our fee for these services will be:

One-time items:

- \$300 Initial Setup of QuickBooks Online (QBO), (one-time fee, paid in advance) ALL MONTHLY CLIENTS
- \$500 New 501c3 (onetime fee, ½ paid in advance, does NOT include QBO service)
- \$500 New LLC or Corporation creation (onetime fee, ½ paid in advance – DOES include the Initial Setup of QBO fee)
- \$400 QuickBooks cleanup service (onetime fee, ½ paid in advance) <https://carlwcpa.com/make-a-payment/>
- \$400 Corporate type income tax return (only)

\$ _____ one-time for _____

\$ _____ one-time for _____

Monthly items:

- \$300 per month for ALL bookkeeping and tax returns
- \$150 per month for a non-profit group or simple business (avg < 10 transactions per month, one bank acct)
- add \$10 per month, per employee for Payroll
- add \$200 per month for Full Service Accounts Payable
- add \$200 per month for Full Service Accounts Receivable
- add \$50 per month for Annual Compilation or Review Report
- Or \$600 per month for ALL OF THE ABOVE (plus \$10 per employee).
 - add \$100 per month if Online Bank and Cr Card Access is not allowed
 - \$50 less per month if Client is paying for QuickBooks Online
- \$500 per month (plus \$10 per employee), for Payroll Services Only

\$ _____ monthly for _____

\$ _____ monthly for _____

\$ _____ Total monthly

* Fees include QuickBooks Online at no charge to you.

* Fees include your annual reports AND tax returns.

* Any other services outside the scope of this agreement will be contracted separately.



Approvals

We are pleased to have you as a client and hope this will begin a long and pleasant association. Please sign and date a copy of this letter and return it to us to acknowledge your agreement with the terms of this engagement. Scan (or take a pic with your phone) and send via “secure email” to carlwcpa@gmail.com. Email us separately to request a “secure link, if we have not already provided one.

Monthly Credit Card Authorization (required)

You authorize the above one-time set up fee and then after, the monthly charges as indicated to your credit card. This will be charged on the 1st (or ____) of each month, for that months service. You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 15 days prior to the payment being collected.

Credit Card Number: _____ Exp MM/ YY ____ / ____ CVV ____

Cardholder's name: _____

Card billing street address: _____ Zip _____

Acknowledged:

Customer

Date

Carl E. Wessels, CPA

Date



New LLC / Inc info sheet

Business name (dba) _____

Legal name: same,
 what is that???, : _____

Physical address: _____ Apt/Suite#: _____

City: _____ ST: _____ Zip Code: _____

Mailing address:
(same as above)

City: _____ ST: _____ Zip Code: _____

Your business phone: (_____) _____ - _____, Fax: (_____) _____ - _____

Business EIN (IRS Tax ID#): _____ Need
If you already have it, we need a copy of the IRS letter please?

Primary contact person: _____

cell: (_____) _____ - _____ email: _____

What product or service to you offer? _____

Est. annual sales \$ _____ excludes, includes sales tax of _____%

Do you currently collect:
Mixed Beverage Tax , Alcohol Gross Rcts Tax , Permit # _____ RT# _____

State Comptroller Numbers _____ XT# _____

Currently using any accounting software? Yes / No If yes: _____

Currently using a POS (point of sale) system? Yes / No If yes: _____

Currently accept credit card payments? Yes / No If yes, merchant: _____

Which bank do you primarily use: _____

Date operations stated: ____/____/____, Fiscal year ends on? Dec 31, or ____/____

Web Site: _____

Is your business listed on: Facebook, Twitter, Instagram, Other



Would you like help with your web site and or social media accounts? Yes / No

We got a gal: <https://tanyaadkins.com/ts-total-business-solutions/>

Last year did you issue any 1099's, W-2's? Did you send a copy to the IRS / Social Security Admin? Yes / No

Do you know what type tax form you have used, would prefer to use, I have no idea
 Schedule C on a 1040, 1065 Partnership, 1120 C-Corp, 1120 S-Corp, 990(ez) Non-Profit,
 other _____

Do you need or already have (date created ___ / ___ / _____) a
 LLC, Incorporation, Partnerships, 501(c)(3) or Other _____?

Do you want our assistance in creating the above indicated entity? (Not required).

Usual cost is \$500 in advance <https://carlwcpa.com/make-a-payment/>

Name first choice:

Make it the same as listed on first page as Legal name, Business name (dba), or :

Name second choice:

May we serve as your "Registered Agent" Yes, no make the Primary contact person the Registered Agent, Make the first owner listed in the next section the Registered Agent, or Other:

Name & Address

What is a Registered Agent? <https://www.sos.state.tx.us/corp/registeredagents.shtml>

The list of owners follows. If there are multiple owners, we will need a copy of your Partnership / Management / Operating Agreement. Need assistance creating that?



List of Owners/Members/Partners

If there are multiple owners, please provide name (per Social Security Card or State Certificate of Filing)

1. Name _____

This Owner is: Individual, Partnership, Corporation, Fiduciary, Tax Exempt, IRA, LLC, Other

Date of Birth: ___/___/___ This Owner is: NOT personally responsible for any company debt.

This Owner is: a Passive member. This Owner is: Foreign (not US Citizen/US Corporation).

This Owner is: to be listed as a Director with the State of Texas.

Director's term does not expire, or term expires on _____.

This Owner is: President/CEO, Vice-Pres/COO, Treasurer/CFO, Secretary, _____

Percent of Ownership: _____ % and if different, Percent of Profits: _____ %, Losses: _____ %

SSN (required) _____ Phone _____

Address _____

City ST Zip _____

email _____

2. Name _____

This Owner is: Individual, Partnership, Corporation, Fiduciary, Tax Exempt, IRA, LLC, Other

Date of Birth: ___/___/___ This Owner is: NOT personally responsible for any company debt.

This Owner is: a Passive member. This Owner is: Foreign (not US Citizen/US Corporation).

This Owner is: to be listed as a Director with the State of Texas.

Director's term does not expire, or term expires on _____.

This Owner is: President/CEO, Vice-Pres/COO, Treasurer/CFO, Secretary, _____

Percent of Ownership: _____ % and if different, Percent of Profits: _____ %, Losses: _____ %

SSN (required) _____ Phone _____

Address _____

City ST Zip _____

email _____



3. Name _____

This Owner is: Individual, Partnership, Corporation, Fiduciary, Tax Exempt, IRA, LLC, Other

Date of Birth: ___ / ___ / ___ This Owner is: NOT personally responsible for any company debt.

This Owner is: a Passive member. This Owner is: Foreign (not US Citizen/US Corporation).

This Owner is: to be listed as a Director with the State of Texas.

Director’s term does not expire, or term expires on _____.

This Owner is: President/CEO, Vice-Pres/COO, Treasurer/CFO, Secretary, _____

Percent of Ownership: _____ % and if different, Percent of Profits: _____ %, Losses: _____ %

SSN (required) _____ Phone _____

Address _____

City ST Zip _____

email _____

4. Name _____

This Owner is: Individual, Partnership, Corporation, Fiduciary, Tax Exempt, IRA, LLC, Other

Date of Birth: ___ / ___ / ___ This Owner is: NOT personally responsible for any company debt.

This Owner is: a Passive member. This Owner is: Foreign (not US Citizen/US Corporation).

This Owner is: to be listed as a Director with the State of Texas.

Director’s term does not expire, or term expires on _____.

This Owner is: President/CEO, Vice-Pres/COO, Treasurer/CFO, Secretary, _____

Percent of Ownership: _____ % and if different, Percent of Profits: _____ %, Losses: _____ %

SSN (required) _____ Phone _____

Address _____

City ST Zip _____

email _____



5. Name _____

This Owner is: Individual, Partnership, Corporation, Fiduciary, Tax Exempt, IRA, LLC, Other

Date of Birth: ___ / ___ / ___ This Owner is: NOT personally responsible for any company debt.

This Owner is: a Passive member. This Owner is: Foreign (not US Citizen/US Corporation).

This Owner is: to be listed as a Director with the State of Texas.

Director's term does not expire, or term expires on _____.

This Owner is: President/CEO, Vice-Pres/COO, Treasurer/CFO, Secretary, _____

Percent of Ownership: _____ % and if different, Percent of Profits: _____ %, Losses: _____ %

SSN (required) _____ Phone _____

Address _____

City ST Zip _____

email _____

6. Name _____

This Owner is: Individual, Partnership, Corporation, Fiduciary, Tax Exempt, IRA, LLC, Other

Date of Birth: ___ / ___ / ___ This Owner is: NOT personally responsible for any company debt.

This Owner is: a Passive member. This Owner is: Foreign (not US Citizen/US Corporation).

This Owner is: to be listed as a Director with the State of Texas.

Director's term does not expire, or term expires on _____.

This Owner is: President/CEO, Vice-Pres/COO, Treasurer/CFO, Secretary, _____

Percent of Ownership: _____ % and if different, Percent of Profits: _____ %, Losses: _____ %

SSN (required) _____ Phone _____

Address _____

City ST Zip _____

email _____



Other items requested if you have them

Bank statements
Copies of W-2s & 1099's issued
List of Vehicles, Trailers, Equipment, etc. or better yet a detailed depreciation schedule
List of Loans, Credit Cards, etc.
Inventory Count
Mileage Log
Receipts for oil changes with odometer readings
Business use of home info
Copy of Login information for EFTPS with a copy of the PIN number assignment
Copy of Appraisal District Rendering
Texas Workforce Commission Number
Any assumed named certificates
S Corp / C Corp election paperwork



Payroll Intake Form

page 1 of 2

This page is only for the employer (client)

Client: _____

Fed EIN _____ TWC # _____
(Attach EIN letter from IRS, if we don't have it already) (we can get this for you)

Contact for time-sheet info: _____

Phone _____ email _____

*** Important note up front, our payroll software (QuickBooks Online) requires **the client** to login to their bank account through QuickBooks to verify the account actually exists. If you have any questions about this, please call us **now**. Bank Name: _____

First Check Date ___/___/_____ For Period Ended ___/___/_____

* We recommend paying on Friday for the period ended **last** weekend.

Pay Schedule (Check One):

- Weekly (52 times per year)
- Bi-Weekly **recommended* (26 times per year, every two weeks on specific day e.g. Friday)
- Semi-Monthly (24 times per year, Twice per Month, example 1st and 16th)
- Monthly (Once per Month)
- Other _____

Preferred Method of Submitting Payroll Hours (Check One):

- Email **recommended*
- Client will enter into QuickBooks Online **almost as good*
- Fax (972-905-7449)
- Hand deliver to CPA Office
- Other _____



PAYROLL INTAKE FORM page 2 of 2

This page is only for the employer (client)

Pay options:

- Direct deposit to employee bank accounts when possible; **recommended*
and
 CPA office to print paper checks when direct deposit is not possible.
or
 Client to print paper checks when direct deposit is not possible.

Pay types:

- Overtime: 1½ after 40hrs, Other _____
- Holiday NYD, MLKD, EASTER Fri, Mem Day, 4th July, Labor Day, Thanksg, Friday after,
 Christmas Day, Birthday, Others _____
- Holidays falling on Saturday are lost, observed on Friday, Other _____
- Holidays falling on Sunday are lost, observed on Monday, Other _____
- Vacation _____
e.g. (after 1st year, employee earns 40 hours on Jan 1st, 80 hrs/yr after 3 yrs. Use or lose)
- Sick pay _____
e.g. (accrue ½ day per month after first month, 6 week max)
- Bonus _____
- Commission _____
- Reimbursement for _____
- Reimbursement for _____
- 401k (attach)
- Other _____
- Other _____

Attach:

1. List of **pay rates**, include hire date, birthday, & gender.
2. All wage garnishment orders.
3. Supply of check stock (if appropriate).
Do we have permission to reorder checks
and charge it to your bank account? Yes / No

Signature

Title

Print Name



Employee Direct Deposit Authorization (one sheet for each employee please)

Employee Name (attach copy of social security card and driver's license please):

_____ _____ _____
First name Middle initial Last name

We will copy your **mailing address** from the W-4 form, please attached a copy.

Birth date _____ Hire date _____ Today's Date _____

Gender: Male, Female, Other _____ Pay rate \$_____ per _____ (owner ok_____)

Email: _____

Home phone _____ Cell phone _____

Emergency contact: _____ phone _____

I hereby:

authorize my employer, _____ and its agents, including financial institutions, to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries in error to my checking and/or savings accounts listed below. This authorization will remain in effect until I have informed my employer in writing that I wish to cancel it and my employer has had reasonable time to effect such cancellation. I understand I should contact my bank to verify receipt of funds.

revise direct deposit bank account(s) as indicated below.

cancel direct deposit of my paycheck completely. This cancellation is to take effect immediately and remain in full force and effect until the Company has received written notification from me of authorization to deposit my paycheck automatically. I acknowledge that I will now receive paychecks for which I am responsible for depositing and/or cashing.

Signature _____

Pay order:

Bank name:

	<input type="checkbox"/> Ck	Rtg _____	Amount _____
1 _____	<input type="checkbox"/> Sav	Acct _____	or Percent _____
	<input type="checkbox"/> Ck	Rtg _____	Amount _____
2 _____	<input type="checkbox"/> Sav	Acct _____	or Percent _____

Sorry, no overseas banks Attached voided check(s) if possible please Remaining balance will go to acct 1

*** If the above section is blank, a paper check will be issued, (like they did last century – before computers).

The current IRS W-4 form can be found here:
if the attached forms are 'out of date'

<https://www.irs.gov/pub/irs-pdf/fw4.pdf>

The current US Citizenship and Immigration Services
form I-9, can be found here:

<https://www.uscis.gov/i-9>

