Bookkeeping Organizer

The bookkeeping organizer is used to collect the information needed to complete your monthly bookkeeping. If you do not have your EIN or date of Incorporation, you should still send the form with all other applicable information.

| | | General Inf | formation | on | | | |
|-------------------------------------|---|--|-----------------|-----------------------------|------------------|-----------------|--|
| Name: | lame of Business: |): :: | | | Entity Type: LLC | | |
| Date of Incorporation/Organization: | | EIN: | Produ | Product or Service offered: | | | |
| Do you h | ave any credit cards use | d exclusively for business: | | O Yes | O No | | |
| If yes: Name of card: | | , | last 4 digi | | | | |
| | Name of card: | | last 4 | digits of card: | | | |
| If any of the | e cards listed are used for person | nal reasons, no matter how small, the ir | nterest deducti | ion is disallowed | | | |
| | | Date Busin | ess Beg | an | | | |
| to become tax de | | ntil after the "Start-up" phase act date ordinary business ope | | | | | |
| | W | hat day did ordinary business | operations | begin? (check or | ne) | | |
| | Date of First Sale | Other: | | | Bus | siness still in | |
| O | Date: | Date: | | | | Start-up phase* | |
| | *If the company never lea | ves the start-up phase all expenses | incurred will | be non-deductible f | or tax purposes. | | |
| | | Start Up Expense | es Alrea | ndy Paid | | | |
| description of the | | Di | ate Paid | | Vendor | Amount | |
| Fee paid | to Secretary of State | | | | | | |
| Fee paid | for Coaching/Training (1 | | | | | | |
| Fee paid for Coaching/Training (2) | | | | | | | |
| Website Building & Design Fees | | | | | | | |
| Advertisi | | | | | | | |
| Drop Shi | pper Sign up Fees | | | | | | |
| Initial Acc | counting & Legal Fees | | | | | | |
| | Descri | ption | | | | | |
| Other: | | | | | | | |
| Other: | | | | | | | |
| Other: | | | | | | | |
| | | Utilities used b | y the Bu | usiness | | | |
| - | ave any utilities that you ase estimate the busines | use for business purposes? | | O Yes | O No | | |
| Home Phone | | Cell Phone: 0% | Fax: | 0% | Internet: 0% | , D | |