

ADDITIONAL SERVICES

Please complete and submit with your tax documents for preparation.

To affirm that this letter correctly summarizes your understanding of the arrangements for this work, sign this letter in the space indicated and return it to us with your tax documents.

Thank you for the opportunity to be of service. If you have any questions, contact our office at the numbers listed below.

Accepted by:

Responsible Party

Responsible Party

Printed Name

Printed Name

All responsible parties must sign for preparation of joint returns.

Date

Date

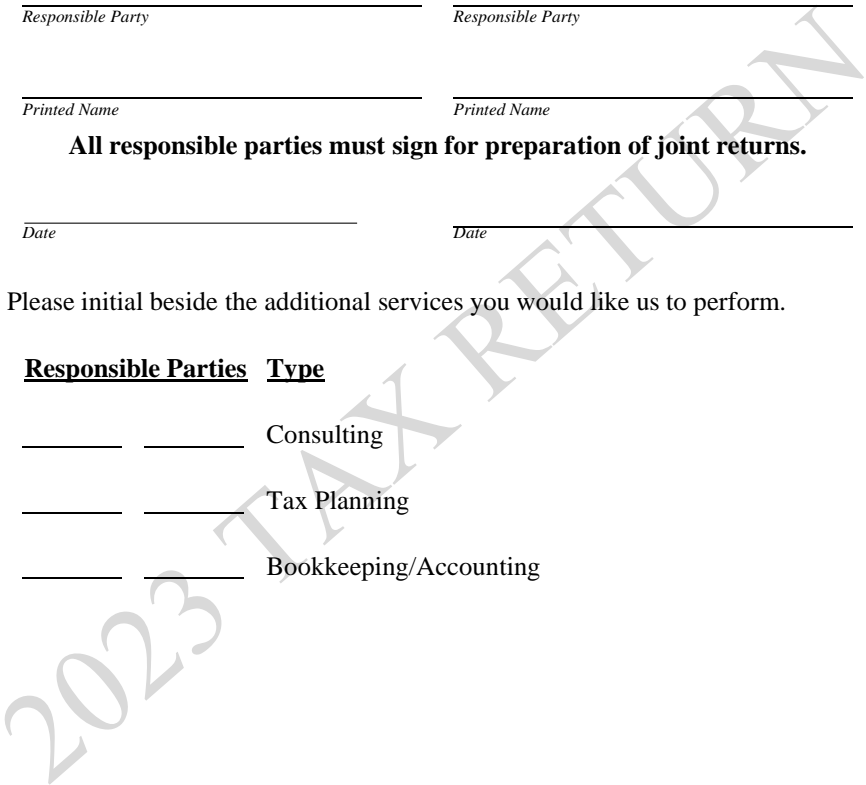
Please initial beside the additional services you would like us to perform.

Responsible Parties Type

_____ _____ Consulting

_____ _____ Tax Planning

_____ _____ Bookkeeping/Accounting



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