



NEW CLIENT INFORMATION SHEET

Individual:
Business:
Trust:

Ind. Client Name: _____
Spouse Name: _____

Mailing Address: _____

Cell # _____
Cell # _____
Home # _____
Bus. # _____
Fax # _____

Tax Updates and Newsletters: I agree to receive estimated payment reminders, newsletters, or marketing content via email

Note: Felsing LLC will not send any updates or newsletters should you decide not to hire our firm.

Client Email: _____
Spouse Email: _____

Yes No
Yes No

Business/Trust name: _____
Contact Name: _____
Title: _____
Contact Email: _____
Mailing Address: _____

Bus. # _____
Fax # _____
Cell # _____
Year End Date: _____

Referred By: _____
Title: _____
Company: _____
Address: _____

Phone # _____
Email: _____