



Confidential Questionnaire (Please complete prior to our appointment)

Your Name: _____

Company Name: _____

Business Address: _____

City _____ State: _____ Zip Code _____

Phone: _____ Cell (optional): _____

Email: _____

Best time to reach you: _____

Website (if applicable) _____

Thirty-Four Questions

1. What do you hope to gain from our consultation? _____

2. What is your business entity type?

- Sole Proprietorship (Schedule C/C-EZ on IRS Form 1040)
- Limited Liability Company Single Member Owner (Schedule C/C-EZ, E, or F on IRS Form 1040)
- Sub-chapter S Corporation (IRS Form 1120-S)
- Nonprofit Organization (IRS 990)
- Limited Liability Company Partnership (IRS Form 1065)
- General Partnership (IRS Form 1065)
- Limited Liability Company Corporation (IRS Form 1120)
- Corporation (IRS Form 1120)

3. What is your business model?

- | | |
|---|---|
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Distributor |
| <input type="checkbox"/> Retailer | <input type="checkbox"/> Franchise |
| <input type="checkbox"/> Aggregator (ex. Uber, Airbnb, Lyft, etc.) | <input type="checkbox"/> Online Marketplace (ex. Amazon, Alibaba) |
| <input type="checkbox"/> Affiliate Marketing | <input type="checkbox"/> Drop-shipping |
| <input type="checkbox"/> Brick-and-mortar – has a physical location to deal with customers face-to-face | |
| <input type="checkbox"/> eCommerce | |



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Bricks-and-clicks – has a physical location to deal with customers face-to-face and sells through an online presence

4. What is your industry? (Check the applicable industry. **NOTE: if you require assistance please use the attached US Business Census Industry of Category list)**

- Agriculture, forestry, fishing, & Hunting
- Manufacturing
- Construction
- Retail Trade
- Information
- Finance and Insurance
- Professional, Scientific and Technical Services
- Management of Companies and Enterprises
- Other Services
- Administrative and Support and Waste Management
- Central Administrative Services
- Mining
- Utilities
- Wholesale Trade
- Transportation and Warehousing
- Real Estate and Rental and Leasing
- Health Care & Social Assistance
- Arts, Entertainment and Recreation
- Accommodation and Food Services
- Educational Services

5. Are your tax returns current? Yes No

6. Who prepares your business taxes?

- I prepare myself H & R Block or other tax service Accountant or CPA

7. Do you currently have a bookkeeper on staff? Yes
 No

8. Do you currently have an Accountant or CPA? Yes
 No

9. Have you had any business training? Yes
 No

10. If yes to question #9, how was the business training obtained?

- Small Business Administration (SBA)/Senior Core of Retired Executives (SCORE)
- State/city small business development center
- Business Training Video
- Online Business Training Course
- College/university degree
- Foundation Entrepreneurial Course

11. How long have you been in business?

- Less than one (1) year 1-5 years 6-10 years 15+ years



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12. Our gross sales were the following for:

The most current calendar year

Previous calendar year

Possible Annual Gross Sales

N/A in business less than a year

\$100,001 - \$200,000

\$500,001 - \$1,000,000

More than \$1,000 but less than \$100,000

\$200,001 - \$500,000

\$1,000,000+

13. What was your net profit last year?

Possible Annual Net Income

The most current calendar year

Previous calendar year

Possible Annual Net Income

N/A in business less than a year

\$100,001 - \$200,000

\$500,001 - \$1,000,000

More than \$1,000 but less than \$100,000

\$200,001 - \$500,000

\$1,000,000+

14. How many employees do you have?

N/A

1-5

6-10

10+

15. How are you processing your payroll?

No Payroll to Process

Internal manual process

Professionally managed payroll systems (bookkeeper or accountant)

Software managed payroll systems

External Payroll services managed by independent payroll system agency

16. How have you been keeping your financial data (check all that apply)?

Paper Receipts & Bank Statements

Excel spreadsheet, credit card processing, & bank statements

Accounting software and credit card processing

Credit card processing

Digital Wallets (PayPal, SamsungPay, ApplePay, Venmo, CashApp or GooglePay)

17. How many hours is spent on your bookkeeping or financial data per week?

0-5 hours

6-15 hours

15+ hours

18. How many hours is spent on payroll processing per week (skip if answer to #14 is N/A or #15 is No)?

0-5 hours

6-15 hours

15+ hours



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19. Do you have experience with this particular business product or service?

Yes

No

20. What do you think your busiest quarter is?

1st - January - March

2nd - April - June

3rd - July - September

4th - October - December

21. How many months behind are you? _____

22. How many sales invoices or receipts per month do you process? _____

23. How many bank accounts do you have? _____

24. How many business credit cards or accounts do you have? _____

25. How many digital wallets do you accept (PayPal, SamsungPay, ApplePay, Venmo, CashApp or GooglePay)? _____

26. Do you have any business loans? If so, what the payment frequency and terms?

Payment Frequency _____ Payment Terms _____

27. Are you registered for sales tax? Yes

No

28. Do you operate a sales ledger or receipt book? _____ Yes

_____ No

29. What type of invoicing method do you currently use?

30. What are your business goals for:

The next 6 months? _____

One year? _____

Five years? _____

31. Why did you select this particular business product or service? _____



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32. Please check a box to rate your knowledge or comfort with the topics on the next page. A brief description for each is included: five (5) being the advanced knowledge or comfort level to one (1) being no knowledge or comfort level.

	Advanced to No Knowledge
A. Startup & small business law: Company formation, business registration, internet privacy, intellectual property, patents, trademarks, copyright, hiring and firing employees and contractors, contracts	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
B. Starting a business: entrepreneurial mindset, business idea generation, creating a business plan and model, launching your business	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
C. Understand strengths, weaknesses, opportunities and threats (SWOT) analysis: goal setting and strategic planning	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
D. Finance/Accounting: accounting for labor and inventory costs, preparing and understanding financial statements, determining business valuation, raising capital	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
E. Financing Options for small businesses: what’s the difference between business loans, grants, angel investors, venture capital, and crowdfunding	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
F. Fundamentals of Accounting: accounting terminology and principles, understanding the main financial statements used in accounting systems	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
G. Business Marketing: content marketing, search engine optimization, social media options	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
H. Business Operations: internal processes, liability risks, compliance with government regulations, creating business value	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
I. Human Resources: the hiring process (job descriptions recruiting, interviewing), onboarding team members, employment law, safe work environment, policies and procedure manuals, providing employee feedback, termination and/or separation, payroll and payroll taxes, benefits	<input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1

33. When you think about your knowledge or comfort level, which of the above stays in your mind as the most important that you require assistance with? (check one)

- A B C D E F G H I

34. When you think about your knowledge or comfort level, which of the above stays in your mind as the least that you require assistance with? (check one)

- A B C D E F G H I

Thank you for completing this form. Please email the completed form to: hugheswalkergroup@gmail.com. We will call to discuss your consultation.