

WELLER CONSULTING

12220 Birmingham Hwy Bldg 30 • Milton, GA 30004
Phone/Fax: 888-327-9306/678-623-0588 •
tax@wellerconsulting.com

Dear Client:

To begin your tax preparation, please sign the Client Acknowledgement form and **fax to us at 1.888.327.9306 or 678.623.0588. This signed form is required to begin work on your returns.**

It is an honor and pleasure to have the opportunity to work with you for your 2017 tax preparation. We also provide tax planning, and welcome the opportunity to assist you with ways to reduce your taxes, and keep more money in your pocket. If you have any questions, please call us at 1.888.327.9306 or 678-813-5292.

Gina Weller

CLIENT ACKNOWLEDGEMENT

I declare all information I have provided Weller Consulting USCC is true and correct to the best of my knowledge. I understand that in the event of an audit by the Internal Revenue Service, I am solely and completely responsible to provide written documentation and proof of all statements made on my tax return. I realize that Weller Consulting USCC is advising me and providing tax services to the best of their knowledge and belief; however, Weller Consulting USCC is in no way liable for the content of my return which is provided solely by me and not verified by Weller Consulting USCC. Additional charges will be incurred for any bookkeeping and consultation services necessary to compile information not provided on Weller Consulting USCC Organizer or if information is otherwise incomplete to prepare the tax return. I understand and release Weller Consulting USCC and any persons involved of any liability in the event that I do not provide information requested to prepare my income tax return within three (3) days after receiving the official request, whether verbally or in writing.

I have read the policies and procedures outlined in Weller Consulting USCC General Tax Organizer and agree or acknowledge all information contained therein. I am requesting that Weller Consulting USCC prepare my returns and I agree to pay for services rendered immediately upon receipt of invoice prior to electronic filing.

X _____ Date
Taxpayer Signature

X _____ Date
Spouse Signature

Please print name of any business entities to be included:
