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| **S.No** | **Questions and Answers** | **Changed** |
|  | I understand that this is purely for educational purposes. Although fairly accurate, this does not constitute an actual quote nor imply we are engaged  for bookkeeping services.\*  A. I accept  B. I don’t accept  ok |  |
|  | To start if off, What is your company name?\*  Type your answer here…  ok |  |
|  | Great. What is your first name?\*  Type your answer here…  ok |  |
|  | Thanks s What is your last name?\*  Type your answer here…  ok |  |
|  | What is your email address?\*  We won't spam you with emails. We hate that too. The price is sent to the email address you put down.  [name@example.com](mailto:name@example.com)  ok |  |
|  | What accounting software do you use?\*  Dropdown  Quickbooks Online  Quickbooks Desktop Other  ok |  |
|  | How many employees do you have?\*  1-4  5-10  11-25  25-50  50-200  ok |  |
|  | What is your gross revenue?\*  Under $100k  $100k- $500k  $500k-$1MM  $1MM-$5MM  $5MM-$10MM  $10MM+  ok |  |
|  | Which services are you interested in? \*Contact us for pricing on project accounting.\*  A. Reconciliation  B. Accounts Payable  C. Accounts Receivable  D. Expense Management  E. Payroll  F. Financial Dashboard  ok |  |
|  | Reconciliation  How many bank accounts?\*  A. 1  B. 2  C. 3  D. 4  E. 5  ok |  |
|  | How many credit card accounts?\*  A. 1  B. 2  C. 3  D. 4  E. 5  ok |  |
|  | How many total transactions per month?  Please include all transactions from your bank and credit card  A Less than 100  B 100  C 150  D 200  E 250  F 300  G 350  Η 400  I 450  J 500  OK |  |
|  | How would you like to be contacted?\*  A PHONE  B Email  C both  Ok |  |
|  | Any special comments for us?\*  Type your answer here…  ok |  |
|  | How many checks do you cut a month to vendors?  A Less than 5  B 10  C 15  D 20  E 30  F 40  G 50  OK  Accounts Receivable  a.  How many invoices do you generate in a month?\*  A Less than 5  B 5 to 10  C 11 to 20  D 21 to 30  E 31 to40  F 40 to 50  OK |  |
|  | b.On average, how many line items per invoice?\*  A Less than 5  B 5 to 10  C 11 to 15  D 16 to 20  OK |  |
|  | c.How often do you bill your customers?\*  AWeekly  B Bi-Weekly  C Monthly  D Other  ok |  |
|  | Expense Management  Continue  a.  How many employees require expense management?\*  Expense reports generated, and reimbursed.  A 1to 4  B 5 tO 10  C 10 to 20  D 20 to 30  Ok |  |
|  | Are expenses billed to your customers?\*  A Yes  B No |  |
|  | Payroll  Payroll will not be included in this estimate. We can send you a custom quote if you would like us to contact you at the end of the form.  a.  How often do you run payroll?\*  AWeekly  B Bi-Weekly  C Monthly  D Other  ok |  |