

CLIENT PROFILE (CORPORATE)

CLIENT: YEAR END:

Business Address: Tel #
 Fax:
 Pager:
 Email: Cell:

ORGANIZATION: Incorporated Partnership Proprietorship Society

ENGAGEMENT: Audit Review Engagement Notice to Reader T2

INCORP DATE: INCORP. NO: BUSINESS NO:

WCB ACCT: PST #:

SHARE CAPITAL	SHAREHOLDERS	SHARES	SIN
Authorized:
Issued:

OFFICERS/ DIRECTORS	ADDRESS	POSITION	S/A
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	Banker # 1:	Banker # 2
Name
Address
Phone	Fax	Fax
Contact
	Solicitor	Insurance Broker
Name
Address
Phone	Fax	Fax
Contact

Associated/Related Co:

OFFICE USE ONLY

Notes For Current Year:

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FILE BUDGET

Date & initials	Prepared	Reviewed	Index
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