

# QUICKBOOKS FISCAL FITNESS SELF ASSESSMENT

To help us design a program tailored to your specific needs with optimum results, please fill out the following self assessment to identify your fiscal strengths and weaknesses.

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Description of Company \_\_\_\_\_  
\_\_\_\_\_

## In QuickBooks my comfort level is as follows:

	Novice	Somewhat Comfortable	Very Comfortable	N/A
Invoicing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entering and Paying Bills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tracking Credit Card Expenses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sales Tax Issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Payroll	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inventory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bank Reconciliations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fixed Assets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## I would like help in the following areas:

- Analysis of my QuickBooks transactions to evaluate accuracy.
- Written procedures specific to my business.
- Training in areas of QuickBooks I do not understand.
- Help with the setup of QuickBooks.
- Monthly, quarterly or annual review of QuickBooks files with preparation of interim financial statements for banks and creditors.
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Please call Patty Corfman at **794-1551** or fax this form to **794-1552** , and we will schedule your free no-obligation consultation. We look forward to working with you!