|  |
| --- |
| **SECTION 1: COMPANY INFORMATION** |
| **Company Name:** | Click here to enter text. |
| **Address:** | Click here to enter text. |
| **Contact Person:**Click here to enter text.  | **Department:**Click here to enter text. |
| **Office Number:**Click here to enter text. | **Mobile Number:**Click here to enter text. | **Email:**Click here to enter text. |
| **SECTION 2: SERVICE INFORMATION** |
| **Service Grouping:** | **Service 1:**Choose an item. | **Service 2:**Choose an item. | **Service 3:**Choose an item. |
| ***For the Service Groupings requested above, please indicate the specific service required:*** |
| **Accounting:** | [ ]  Outsources Resource for Data Entry[ ]  Review and Preparation of Financial Statements[ ]  Preparation of VAT Returns | **Payroll:** | [ ]  Payroll Processing[ ]  TD4 Preparation |
| **Corporate/Secretarial:** | [ ]  Annual Returns[ ]  Company Registration[ ]  BIR Registration[ ]  VAT Registration | **Taxation:** | [ ]  Annual Tax Returns[ ]  Quarterly Tax Calculation |
| **Corporate Finance:** | [ ]  Debt Structuring[ ]  Mergers and Acquisitions[ ]  Strategic Management | **Other:** | Click here to enter text. |
| **SECTION 3: SERVICE DELIVERY INFORMATION** |
| **Location Where Service is to be Performed:**Click here to enter text. | **Expected Start Date:**Click here to enter text. | **Expected Completion Date:**Click here to enter text. |
| **Estimated Budget *(optional*):**Click here to enter text. | **Other Information:**Click here to enter text. |
| **SECTION 4: ADDITIONAL INFORMATION** |
| **If you have any additional comments please advise:**Click here to enter text. |

|  |
| --- |
| **SECTION 5: APPROVALS** |
| **Date Received (Onestà):**Click here to enter a date. | **Representative (Onestà):**Click here to enter text. |