JONATHAN A. VELEY

INITIAL BUSINESS FORMATION QUESTIONNAIRE

Names of all persons to be involved with new business:

Name Address Phone/email

_____

_____

_____

_____

_____

Are above persons related? How? _____

Nature of business to be conducted _____

Is this a continuation of another business? If so, what? _____

Type of entity desired: LLC C-Corporation S-Corporation Limited Partnership

Partnership

Purpose of new entity _____

Number of employees expected in next 12 months _____

Name and phone number of Accountant Consulted _____

Home address for new entity _____

Statutory agent _____

How did you hear about me? _____ _____