

CLIENT COMPLETION AGREEMENT

This form documents completion of the referral requirements under the Client Business Agreement.

Client Business

By submitting this form, the Client Business confirms that it has completed the referral requirements outlined in the Client Business Agreement.

Referral requirement: Four (4) referrals. At least one must be a tax-preparing professional or CPA; the remaining referrals must be qualifying small businesses with fewer than 30 full-time employees.

1. REFERRAL INFORMATION

Referral 1

Name	
Address	
Telephone	
Email	

Referral 2

Name	
Address	
Telephone	
Email	

Referral 3

Name	
Address	
Telephone	
Email	

Referral 4

Name	
Address	
Telephone	
Email	

2. ALTERNATIVE SUBMISSION

Instead of completing the referral fields above, the Client Business may provide four business cards or equivalent contact information by copy, scan, mail, or email.

3. CERTIFICATION

The Client Business certifies that the information submitted satisfies the referral requirement under the Client Business Agreement.

Business Owner

Signature

Date

Submit completed and signed documents to:

Web Access for the Blind, LLC
Attn: David O. Steckelberg, President
1415 East Blanco Road, Ste 9
Boerne, TX 78006
david@stecktax.com