

ProSystem fx Practice Custom Report Specifications

The purpose of this document is to gather information in advance of rendering assistance to your firm in developing a Custom Report.

Upon receipt of this completed form, the contact person listed below will be phoned by Practice Technical Support and stepped through creating the report. Should complexity and/or difficulty of request preclude support from facilitating the request via phone, the contact person will also be notified.

NOTE: This is a request for assistance only, not a formal request for creation and distribution of a "fee-based" Custom Report by CCH Tax and Accounting.

Please answer the following questions and fax to **Practice Support; Attn:** at **(316) 688-4434**.

Firm Name: _____

Account No. _____

Contact Name: This individual should possess knowledge of the ProSystem fx Practice Custom Report Writer module and data the report will display.

Name: _____

Phone Number: _____ ProSystem fx Practice Version _____

E-mail address: _____

Briefly describe the report you need:

Will your report be based on ProSystem fx Practice periods or a date range? _____

If the report is period based, do you want it to show current period/current fiscal year or do you want to be able to specify the starting and ending periods for the report? _____

Will the report be in detail or summary format? _____

What fields, if any, do you want subtotaled? _____

What information (fields) do you want to search by? _____

Indicate the field and the type of search you need.

Field _____ Type of Search: Range In List One Value

Field _____ Type of Search: Range In List One Value

Field _____ Type of Search: Range In List One Value

What fields do you want to sort on and in what order?

Sort 1 _____

Sort 2 _____

Sort 3 _____

The report will be formatted to print in either portrait or landscape orientation, depending on the number of columns or the amount of information on the report.

Indicate the format selection. Type of format: Portrait Landscape

Please review the sample report, below. Fax a sample copy of how you want your report to look along with this questionnaire to (316) 688-4434. If you do not have an example, please sketch a mockup of the format and information you need on the report. Please note the "callouts" below and how they indicate where you want the data to display on the report.

Daily Cash Report

<i>Client ID</i>	<i>Eng.</i>	<i>Client Name</i>	<i>Check Number</i>	<i>Invoice Number</i>	<i>Type</i>	<i>Amount</i>
4202	001	Gary Edwards	3221	00100106	P	(\$200.00)
4203	001	Dynasty Industries	4566	00100062	P	(\$33.00)
4203	001			00100062	P	(\$1,000.00)
4206	001	Mr. Ted Simkins			P	(\$100.00)
5224	001	Jack Greg Properties			P	(\$850.00)
5224	002	Shawndra Morton			P	(\$150.00)
5224	003	Bennett Meyer			P	(\$225.00)
TOTAL						(\$2,558.00)

