



**Client Information**

**Taxpayer**

Name \_\_\_\_\_

SSN \_\_\_\_\_ Birthdate: \_\_\_\_\_

Phone (Work): \_\_\_\_\_

Phone (Home): \_\_\_\_\_

Phone (Cell): \_\_\_\_\_

**Home Address** \_\_\_\_\_

**City** \_\_\_\_\_

Email \_\_\_\_\_

Occupation: \_\_\_\_\_

**Spouse**

Name \_\_\_\_\_

SSN \_\_\_\_\_ Birthdate: \_\_\_\_\_

Phone (Work): \_\_\_\_\_

Phone (Home): \_\_\_\_\_

Phone (Cell): \_\_\_\_\_

**State** \_\_\_\_\_ **Zip** \_\_\_\_\_

Spouse Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Filing Status (Check One):    Single    Married Filing Joint    Married Filing Separate    Head of Household

Dependent's Name (First, Initial, Last Name)	Date of Birth	Dependent's SSN	Relationship to you	# of months in your home in '18

\*If child is over 19 yrs old, was the child a full time student for at least 5 months or disabled? Yes or No

\*If the biological parent is not living with the child, where is the parent? \_\_\_\_\_

\*Can you provide documentation (school records, medical records, etc.) that the child lived with you for more than half of the year? Yes or No

\*Can someone else claim you as a dependent? Yes or No

\*Were you legally married as of December 31? Yes or No

\*I am married, but separated on \_\_\_\_\_ Initial Here: \_\_\_\_\_

**CHECK ALL THAT APPLY**

• # of W2's _____	• Self Employment	• Social Security
• 1099-G Unemployment	• 1099R Pensions or Annuities	• 1099-INT Bank Interest
• Did you sell stock?	• 1098 Mortgage Interest	• College tuition
• Student loan interest	• Child care expense	• Real estate taxes paid
• Retirement contribution	• Child support \$ _____	• Workers comp \$ _____
	• Other household income	• _____

**I CERTIFY THAT I WOULD LIKE MY TAXES PREPARED ACCORDING TO THE INFORMATION I SUPPLIED ABOVE.**

Signed \_\_\_\_\_

Date \_\_\_\_\_