

Tax Return Drop Off Sheet

This sheet must be filled out as completely as possible

Returning ClientNew Client Referred by							
Client Name			Spouse Na	ame			
Occupation			Occupation	1			
E-mail			E-mail				
Social Security #			Social Sec	urity #			
Client Birth Date			Spouse Bir	rth Date			
Cell Phone			Cell Phone				
Alternate Phone			Alternate P	hone			
Best time to call							
Latest time to call							
Address: Can you be claimed as a Are you or your spouse a	dependent by s	omeone el	se?				
Dependents (or persons	living in your ho	usehold). I	Jse the back o	of this form if more	room is needed	d.	
First and Last Name	Relatio Taxpa	onship to yer	Birth Date	Social Security # Or ITIN	Full Time Student?	Disabled?	
Did any of the dependent	ts listed live in th	ie househo	ld for less thar	n a full year?			
Is anyone in your househ	old attending co	llege?					
•							
Do you have any addition	nal information th	nat we sho	uld know?				



DOCUMENT CHECKLIST

Income: Check all that apply and include the requested documents, if available.

Income From:	Check if Yes		Check if Yes
Employer (W-2)		Self Employment (1099-Misc)	
Interest (1099-Int)		Social Security or Retirement	
Dividends (1099-Div)		Rental Property	
Stock or Mutual Fund Sale (1099-B)		Unemployment	

Expense: Check all that apply and include the requested documents, if available.

Expenses From:	Check if Yes		Check if Yes
Self-Employment		Un-Reimbursed Employee Expenses	
Education		Rental Property	
Medical/Dental		Union Dues	

Credits & Deductions: Check all that apply and include the requested documents, if available.

Did you or your spouse:	Check if Yes		Check if Yes
Donate to a charity?		Pay student loan interest?	
Make an IRA contribution?		Have a Mortgage Payment?	
Pay child care expenses?		Make a major purchase?	
Pay property taxes?			

Miscellaneous: Check all that apply and include the requested documents, if available.

Did you or your spouse:	Check if Yes		Check if Yes
Sell a home?		Contribute to a 401K or IRA?	
Pay or receive alimony?		Adopt a child?	
Suffer a casualty loss?		Have gambling winnings or losses?	

Please leave all W2s, 1099s, 1098s, and anything else that may be useful in the preparation of your tax return. We will schedule a telephone interview and/or office appointment to finalize your return.

Legal Disclaimers

The following documents have been received, explained, and signed:

- Consent to Use and Consent to Disclose Service Provider documents
- Privacy Policy
- Engagement Letter

Signature	Date