

INDIVIDUAL INFO SHEET

TAXPAYER		SPOUSE	
First	_____	First	_____
Last	_____	Last	_____
SSN	_____	SSN	_____
D.O.B.	_____ (MM/DD/YYYY)	D.O.B.	_____ (MM/DD/YYYY)
	D.O.D. _____ (MM/DD/YYYY)		D.O.D. _____ (MM/DD/YYYY)
DL/ID #	_____ State _____	DL/ID #	_____ State _____
Issued	_____ (MM/DD/YYYY)	Expires	_____ (MM/DD/YYYY)
Best PH	_____ Other PH _____	Best PH	_____ Other PH _____
Email	_____	Email	_____
How did you hear about us? Referral _____			
Google Facebook Other _____			

STREET ADDRESS (to be reflected on the return)

Address _____

City _____ ST _____ Zip Code _____

School District (where you lived on Dec. 31) _____

DEPENDENT(S) (to be claimed on current year's income tax return)

First Name	Last Name	Birthdate	SSN	Relationship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

BANKING INFORMATION

I/We would like any **REFUND** directly deposited. I/We would like any **TAX DUE** deducted from my account.

Name of Financial Institution _____

Routing # _____ Account # _____ Account Type _____

If filing jointly (MFJ), both taxpayer & spouse are on the account (above).

NOTES or OTHER INFORMATION YOU WOULD LIKE US TO KNOW