

Client Interview Sheet_____

Preparer_____

Taxpayer Name _____ **Phone Number** _____ **Email** _____

Date of Birth _____ **Occupation** _____ **Social Security Number** _____

Spouse Name _____ **Phone Number** _____ **Email** _____

Date of Birth _____ **Occupation** _____ **Social Security Number** _____

CURRENT Mailing Address _____**Dependents****(Please list any additional on back or a separate page)**

Name _____ **D.O.B.** _____ **S.S.N.** _____ **Relationship** _____ **Months in home** _____

Name _____ **D.O.B.** _____ **S.S.N.** _____ **Relationship** _____ **Months in home** _____****PLEASE ONLY ANSWER THE QUESTIONS BELOW IF YOU'RE DROPPING OFF YOUR TAXES)******Please circle your answers**-Did you have Health Insurance? **Y or N** if so, How many months _____? Provider _____Were you provided a Health Insurance tax Form? **Y or N** (There are 2 forms for Covered California)-Do you own your Home (have a mortgage)? **Y or N**-Do you own a rental home/VRBO/Air B&B? **Y or N**-Did you pay for Child Day Care? **Y or N**-Do you own a Business? **Y or N**, If so, Do you have your Profit and Loss Statement? **Y or N**-Have you Sold any Products online? **Y or N*****PLEASE PROVIDE YOUR CURRENT BANKING INFORMATION** (if you want your refund deposited or balance taken out)**ROUTING #** _____ **ACCOUNT#** _____-How would you like to sign for your taxes when they are done? **In Person** or **DocuSign?**-How would you like to pay for your taxes when they are done? **Cash – Check – Card – Bank Product**

“Bank Product” is through your refund if applicable (a fee will be charged)

NEW:** Did you get paid overtime or receive tip income? **Y or N** If so, we will need your last pay stubNEW:** Did you purchase a new vehicle? **Y or N** If so, we will need your sales contract from the dealership~~~~~ **Office Use Only** ~~~~~**FD:** _____ **ST:** _____ **ST:** _____**Invoice Amount:** _____ **Payment Type:** CC Check Cash BP**Refund Choice:** Direct Deposit IRS Check Bank Product**PAYMENT DATE** _____