

DUE TO NEW TAX LAWS/CHANGES, FEES MAY INCREASE FOR PREPARING TAXES THIS YEAR
PAYMENT IS EXPECTED WHEN YOUR TAXES ARE COMPLETED

Drop off Date: _____

New or Returning? (circle)

Name _____ Phone number _____

SSN _____ DOB _____

Driver's License # _____ State _____ Issue Date _____ Exp. Date _____

Home Address: _____

Email Address: _____

Spouse Name _____ SSN _____ DOB _____

Driver's License # _____ State _____ Issue Date _____ Exp. Date _____

Dependents: Children/Others - If returning customer, we have on file from previous year

NAME (First and Last)	RELATIONSHIP	DOB	SSN	MONTHS LIVED WITH	DISABLED	FULL TIME STUDENT

Bank Account Number _____ Routing Number _____

Name of the bank: _____ Checking _____ Savings _____

Did you receive your **THIRD** stimulus check? Amount received _____

Note: \$1,400 for every person claimed on your return. Should have received between March – May of 2021.

Did you receive Advance Child Tax Credit (ACTC) Payments during 2021?

*****IF SO IRS LETTER 6419 MUST BE PROVIDED*****

Total amount received in 2021 _____ # of Qualifying children for ACTC _____

Health Insurance through the Marketplace? If so, Form 1095-A **MUST BE PROVIDED.**

Did you make \$300 (\$600 if MFJ) or more in CASH donations in 2020? Yes _____ No _____

ADDITIONAL INFORMATION:

Signature: _____

By signing this form I acknowledge that any and all information that I am providing in order to prepare my tax returns is accurate and complete to the best of my knowledge. In case of an audit, I am able to provide appropriate receipts, ledgers, documents, or other proof to support the items being claimed on this year's returns and realize that it is my responsibility to do so.