

**Tax-Return Preparation – Client Intake Form****Name:** \_\_\_\_\_ **Date of birth:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_**Email:** \_\_\_\_\_ **Phone:** (\_\_\_\_) \_\_\_\_\_**Social Security Number:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_**Address:** \_\_\_\_\_**Preferred Method of Communication (Circle):**      **Phone**      **Text**      **Email***If you are not married, ignore this section:***Spouse Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_**Email:** \_\_\_\_\_ **Phone:** (\_\_\_\_) \_\_\_\_\_**Social Security Number:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_*If you do not have dependents, ignore this section:***Child Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_**SSN#:** \_\_\_\_\_ **Grade/School:** \_\_\_\_\_**Child Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_**SSN#:** \_\_\_\_\_ **Grade/School:** \_\_\_\_\_*Other Dependent(s), as applicable:***Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_**SSN#:** \_\_\_\_\_ **Grade/School:** \_\_\_\_\_*Banking Information (for deposit of refund, if applicable)(optional):***Account Number:** \_\_\_\_\_**Routing Number:** \_\_\_\_\_**Name of Institution:** \_\_\_\_\_*Driver's License Information:***License Number:** \_\_\_\_\_ **Spouse License Number:** \_\_\_\_\_**Issue Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Spouse Issue Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_**Expiration Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Spouse Exp. Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_**Document #:** \_\_\_\_\_ **Spouse Doc #:** \_\_\_\_\_*The license document number is located either on the bottom right of the front of the license or the "IDUSA" # on the back of the license.*