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.