

# CLIENT INFORMATION FORM

County \_\_\_\_\_ Date \_\_\_\_\_

City \_\_\_\_\_ New Client \_\_\_\_\_ Updated Form \_\_\_\_\_

Male \_\_\_ Female \_\_\_ **Taxpayer Info** **Please print clearly**

Taxpayer Name \_\_\_\_\_ SS # \_\_\_\_\_

Street Address \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Blind ? \_\_\_\_\_

Employer/Occupation \_\_\_\_\_ / \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_

Home # (Not Cell) (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Male \_\_\_ Female \_\_\_ **Spouse Info** **Please print clearly**

Spouse Name \_\_\_\_\_ SS # \_\_\_\_\_

Street Address \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Blind ? \_\_\_\_\_

Employer/Occupation \_\_\_\_\_ / \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_

Home # (Not Cell) (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**Marital Status:** Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Date of Divorce \_\_\_\_/\_\_\_\_/\_\_\_\_

**Filing Status:**

Single \_\_\_\_\_ Married \_\_\_\_\_ Head of Household \_\_\_\_\_ Married filing separately \_\_\_\_\_ Widow(er) \_\_\_\_\_

<b>Dependents</b> (name-first, middle initial, last)	<b>Date of Birth</b>	<b>S.S.#</b>	<b>Relationship</b>	<b>Months lived in Home</b>

How did you hear about us? \_\_\_\_\_

Who prepared your Income Tax Return last year? \_\_\_\_\_