

2022 General Information 2022

NEW CLIENT(S)? \square YES \square NO				
<u>Taxpayer</u>		<u>Spouse</u>		
First Name:		First Name:		
Middle Initial: Suffix:		Middle Initial: Suffix:		
Last Name:		Last Name:		
Social Security Number:		Social Security Number:		
Date of Birth:		Date of Birth:		
Occupation:		Occupation:		
Company/Base		Company/Base		
Cell Phone:		Cell Phone:		
Home Phone:				
E-mail:		E-mail:		
(Important for file status updates/general communications.) Filing Address (for IRS residency purposes):		*None of your personal information is sold or shared.		
Address:				
	State:Zip Code:			
Mailing Address if Different (for us to send your copy of the tax return and invoice):				
Dependents:				Full time student?
Full Name	Social Security #	DOB	Relationship	Disabled (yes/no)?
Filing Status:				
☐ Single ☐ Married Filing Jointly ☐ Married Filing Separately ☐ Head of Household				
Insurance Questions: Please circle one				
Did you have health insurance through the Affordable Care Act, or An Employer for all 12 months of 2021? Did your spouse have health insurance through the Affordable Care Act, or An Employer for all 12 months of 2021? (ACA) (Employer) (None) (ACA) (Employer) (None)				
Did your dependents have health insurance through Act, or An Employer for all 12 months of 2021?			ordable Care	(ACA) (Employer) (None)
Notes: Referred by:				
Direct Deposit Information: Free! You can choose Direct Deposit even if not filing electronically.				
Tax preparation fees are due at time of filing. Payment methods accepted are cash, check, or credit cards (Master Card & Visa).				
Name of Bank:	□ Checking □ Savings			
	Account Number:			
If you file electronically you will be required to sign IRS Form (Electronic Filing Authorization) and pay your invoice in full before our office can E-File your tax return for you.				