

# Customer Data Entry

## Taxpayer Information

SSN:

-

-

Birthdate:

/

/

Name:

Occupation:

Are you a dependent of another?

Yes

No

Blind?

Yes

No

Active-Duty Military?

Yes

No

Home Phone:

(

)

-

Work:

(

)

-

Cell:

(

)

-

E-Mail:

Text Message:

Cell Phone Carrier:

Send me text alerts?

Yes

No

Preferred Contact:

## Spouse Information

SSN:

-

-

Birthdate:

/

/

Name:

Occupation:

Are you a dependent of another?

Yes

No

Blind?

Yes

No

Active-Duty Military?

Yes

No

Home Phone:

(

)

-

Work:

(

)

-

Cell:

(

)

-

E-Mail:

Text Message:

Cell Phone Carrier:

Send me text alerts?

Yes

No

Preferred Contact:

☐ Single

☐ Married-Filing Jointly

☐ Married-Filing Separately

☐ Head of Household

☐ Qualifying Widower

## Address Information

Domestic:

☐

Foreign:

☐

Care / of:

U.S. Address:

Apt. No.:

City, State, Zip:

-

APO / DPO / FPO:

☐

Combat Zone:

## OFFICE USE ONLY

Dependents

	First Name	Last Name	Birthdate (mm/dd/yyyy)	Age	SSN	son	daughter	parent	grandchild	other (describe)	Relationship	Months In Home	Disabled X if yes
1	<input type="checkbox"/>		____/____/____	____	____-____-____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		____	<input type="checkbox"/>
2	<input type="checkbox"/>		____/____/____	____	____-____-____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		____	<input type="checkbox"/>
3	<input type="checkbox"/>		____/____/____	____	____-____-____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		____	<input type="checkbox"/>
4	<input type="checkbox"/>		____/____/____	____	____-____-____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		____	<input type="checkbox"/>

Check this box if another person could qualify to claim your child as a dependent or receive EIC for that child. Describe below.

Please answer the following questions to the best of your knowledge.

Did you:

Pay someone to watch your child?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Collect social security or retirement income?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Receive unemployment compensation last year?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have income other than your W-2(s)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Get a student loan or make college tuition payments?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Do you owe any delinquent:

Child Support?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Alimony?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Student Loans?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Back Taxes?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

When do you want your refund? (check box)

- ☐ **7 - 14 days (RT-Refund Transfer: Check)**  
In about 7-14 days from the date your return is accepted electronically by the IRS, you receive a check for the amount of your refund less filling fees. (Check will be available in our office)
- ☐ **7 - 14 days (RT-Refund Transfer: Debit Card)**  
In about 7 - 14 days from the date your return is accepted electronically by the IRS, the amount of your refund less filing fees will be deposited onto the debit card we issued you.
- ☐ **7 - 14 days (RT-Refund Transfer: Direct Deposit)**  
In about 7- 14 days from the date your return is accepted electronically by the IRS, the amount of your refund less filing fees will be deposited into your bank account.

THE FOLLOWING PRODUCTS REQUIRE FEES PAID AT TIME OF SERVICE.

- ☐ **(E-file: Direct Deposit)**  
Your refund will be deposited into your savings or checking account approximately 10-14 days after your return is accepted by IRS.
- ☐ **3 - 4 Weeks (E-file: Check)**  
Your refund will be mailed to you approximately 3 - 4 weeks after your return is accepted electronically by the IRS.
- ☐ **Mail A Paper Return**  
Your refund will be mailed to you approximately 6 -8 weeks after you mail your return to the IRS.

All times are estimated because the IRS no longer publishes the refund cycle chart.

Signature \_\_\_\_\_

Date \_\_\_\_\_