REFUNDS AND PAYMENT AUTHORIZATION

Acceptance by client constitutes a mutual understanding and agreement with all terms & engagement of Zachary Hellman (EA)

Work will not pay your tax balance or direct your refund without signed authorization on file

CLIENT NAME(S):					
All tax returns will be e-filed u apply in items 1-5:	inless for te	echnical reasons we are	unable to, or you h	nave opted out	. Please check all the boxes that
1. OVERPAYMENTS Please apply some/all of my I prefer to receive a refund Please schedule automatic pa		•	If you	checked All s	kip to Step 2
2. REFUNDS I want the IRS and State to d No, I prefer to receive a check		refund directly into my	bank account. See 4	. below.	
	(1-3 days a alance due.	after we received your Please be sure the acco	signed documents) ount is funded prior	. We are not to authorization	
4. BANKING INFORMATIO Refunds may be deposited into ACCOUNT 1					7
BANK NAME					
ACCOUNT NUMBER					
ROUTING NUMBER					
☐CHECKING ☐SAVINGS					
ACCOUNT 2					
BANK NAME					1
ACCOUNT NUMBER					
ROUTING NUMBER					
CHECKING SAVINGS	Filing Ye	ear IRA Contribution	Due Date Year IR	A Contribution	l
5. IDENTIFICATION As an additional means of valid or state identification on state re Yes, I have a driver license of TAXPAYER	eturns. Fail	are to provide this info			H, VT, WI require driver license funds.
STATE	ID NUM	BER	STATE		ID NUMBER
EXP	ISSUE D	ATE	EXP		ISSUE DATE
DOC NUMBER (NY ONLY)		DOC NUMBER (NY ONLY)			
No, I do not have a driver lice	ense or stat	te identification card (m		` /	
6. PAYMENT FOR TAX PRI All fees must be paid prior to e-		ON			
CREDIT CARD		Cardholder Name (as shown on card):			
СНЕСК		Card Number:			
PAYPAL - zack@taxpreptech.com		Expiration Date			
VENMO - @zackhellman		CVC			
CASH		Cardholder ZIP Code (from credit card billing address):			
CLIENT SIGNATURE				I	DATE