

## ***Tax Preparation Client Intake***

### ***Fee Disclosure:***

Consultation- no obligation to file	Free
Audit protection	Free
Federal Tax Preparation	\$400
State Tax Preparation	\$150
Business Preparation- Schedule C	\$250
Electronic Filing	\$50
Bookkeeping	\$200

*Bank Fees are separate and are not collected by my office. Bank fees are in addition to your standard fees above.*

***Total*** \_\_\_\_\_

Client Signature \_\_\_\_\_

Preparer's Signature \_\_\_\_\_

Date \_\_\_\_\_

Fees due to be paid from refund \_\_\_\_\_

Fees paid up front \_\_\_\_\_

**Client:**

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Social Security # \_\_\_\_\_ Identity Protection Pin \_\_\_\_\_

Date of Birth \_\_\_\_\_

State ID # \_\_\_\_\_

Issuing State \_\_\_\_\_

Expiration Date \_\_\_\_\_

**Spouse:**

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Social Security # \_\_\_\_\_ Identity Protection Pin \_\_\_\_\_

Date of Birth \_\_\_\_\_

State ID # \_\_\_\_\_

Issuing State \_\_\_\_\_

Expiration Date \_\_\_\_\_

**Address:** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Client Email:** \_\_\_\_\_

**Spouse Email:** \_\_\_\_\_

**Refund Options:** Complete only 1 area

**Direct Deposit:**

Name of Bank \_\_\_\_\_

Account # \_\_\_\_\_ Routing # \_\_\_\_\_

**Paper Check** \_\_\_\_\_ Yes \_\_\_\_\_ No

**Debit Card** \_\_\_\_\_ Yes \_\_\_\_\_ No

**Filing Status:** \_\_\_ Single    \_\_\_ H of H    \_\_\_ Married/Joint  
                                    \_\_\_ Married/Separate    \_\_\_ Qualifying Widow

**Dependents:**

#1

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_

Grade in School \_\_\_\_\_

School Tuition \_\_\_\_\_

#2

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_

Grade in School \_\_\_\_\_

School Tuition \_\_\_\_\_

#3

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_

Grade in School \_\_\_\_\_

School Tuition \_\_\_\_\_

#4

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_

\_\_\_\_\_

Grade in School \_\_\_\_\_

School Tuition \_\_\_\_\_

#5

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_

\_\_\_\_\_

Grade in School \_\_\_\_\_

School Tuition \_\_\_\_\_

#6

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_

School \_\_\_\_\_

School Address \_\_\_\_\_

\_\_\_\_\_  
Grade in School \_\_\_\_\_

School Tuition \_\_\_\_\_

## Self Employed

Name of Business \_\_\_\_\_

Business Address \_\_\_\_\_

EIN # \_\_\_\_\_ Year Started \_\_\_\_\_

Business Phone \_\_\_\_\_

Business Email \_\_\_\_\_

Business Website \_\_\_\_\_

Social Media \_\_\_\_\_

Briefly describe the nature of your  
business \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How are records kept? \_\_\_\_\_

**Total Income** \_\_\_\_\_

### Expenses:

Rental of space \_\_\_\_\_ Rental of Equipment \_\_\_\_\_

Utilities \_\_\_\_\_ Insurance \_\_\_\_\_

Travel \_\_\_\_\_ Lodging \_\_\_\_\_

Contract workers \_\_\_\_\_ Staff Salary \_\_\_\_\_

Commissions Paid \_\_\_\_\_ Advertising \_\_\_\_\_

Repairs \_\_\_\_\_ Supplies \_\_\_\_\_

Other Expenses \_\_\_\_\_ Expenses not mentioned \_\_\_\_\_

Please certify that all information included on this form is correct and true to  
the best of your knowledge.

**Client Signature** \_\_\_\_\_