



4466Elvis Presley Blvd Ste 142  
Memphis TN 38116  
Office: 901-672-7814 Cell: 901-488-4656

## 2022 Tax Season Intake Form

Name: \_\_\_\_\_ SS# \_\_\_\_\_

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

DOB: \_\_\_\_\_ Occupation: \_\_\_\_\_

Home Phone#: \_\_\_\_\_ Cell Phone# \_\_\_\_\_ Carrier: \_\_\_\_\_

Email-address: \_\_\_\_\_

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

DOB: \_\_\_\_\_ Occupation: \_\_\_\_\_

### Dependents:

Name: \_\_\_\_\_ SS# \_\_\_\_\_

DOB: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ SS# \_\_\_\_\_

DOB: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ SS# \_\_\_\_\_

DOB: \_\_\_\_\_ Relationship: \_\_\_\_\_

1. Did your dependent(s) live with you in 2022? \_\_\_\_\_ How many months? \_\_\_\_\_
2. Are you claiming the same dependent(s) as last year? \_\_\_\_\_
3. If grandchild(ren) please provide the following info
  - a. Parent(s) name: \_\_\_\_\_
  - b. Address: \_\_\_\_\_

# SPRINGFIELD

BOOKKEEPING & TAX SERVICES



4466 Elvis Presley Blvd Ste 142  
Memphis TN 38116  
Office: 901-672-7814 Cell: 901-488-4656

4. Did the parent(s) contribute to the care of the child(ren)
5. Do you have birth cert(s) and social security card(s) for the dependents? \_\_\_\_\_
6. Have you ever been denied the Earned Income Credit? \_\_\_\_\_ If yes when: \_\_\_\_\_
7. Did you pay childcare services so that you could work? \_\_\_\_\_
8. What type of public assistant did you received? Please circle all that applies: Food Stamps, Housing Assistant, Welfare, Child Care Assistant

By signing this form, you agree that all information provided is true according to the due delinquency form 8867 pertaining to the earned Income Credit Check List.

Taxpayer Signature: \_\_\_\_\_

Taxpayer Signature: \_\_\_\_\_