

# RETURNING Client Information Form for Tax Year 2018

(If you are not filling in this form online, please *use blue or black ink only and print legibly.*)

## Taxpayer

**Legal** Name (first, MI, last): \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
Field of employment: \_\_\_\_\_  
Driver's License State: \_\_\_\_\_ Number: \_\_\_\_\_  
Issued Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Do you want \$3 of your taxes to go to the Presidential Election Campaign Fund? Yes \_\_\_ No \_\_\_

## Spouse

**Legal** Name (first, MI, last): \_\_\_\_\_  
Field of employment: \_\_\_\_\_  
Driver's License State: \_\_\_\_\_ Number: \_\_\_\_\_  
Issued Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Do you want \$3 of your taxes to go to the Presidential Election Campaign Fund? Yes \_\_\_ No \_\_\_

Taxpayer Cell phone: \_\_\_\_\_  
Spouse Cell phone: \_\_\_\_\_  
Taxpayer Work phone: \_\_\_\_\_  
Spouse Work phone: \_\_\_\_\_  
Home phone: \_\_\_\_\_  
Email address: Taxpayer: \_\_\_\_\_ Spouse: \_\_\_\_\_

If **Refund**, I/We would like to receive by: Automatic Deposit \_\_\_ or Paper Check \_\_\_  
Bank Name: \_\_\_\_\_  
Bank Routing Number: \_\_\_\_\_  
Bank Account Number: \_\_\_\_\_  
Checking \_\_\_ or Savings \_\_\_

If **Tax Due**, pay by: Automatic Debit \_\_\_ or Paper Check \_\_\_

Are dependents the same as last year? Yes \_\_\_ No \_\_\_ (if no, *returning clients only need to note changes or additions*). NOTES: \_\_\_\_\_

## Dependent #1

Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
SSN: \_\_\_\_\_  
Number of months lived with you in 2017: \_\_\_\_\_  
Relationship: \_\_\_\_\_

## Dependent #2

Name: \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
SSN: \_\_\_\_\_  
Number of months lived with you in 2017: \_\_\_\_\_  
Relationship: \_\_\_\_\_

*If there are more than two changes to dependents, please write the additional ones on the back of this form.*

What of state(s) are you resident(s)? \_\_\_\_\_ Dates of residency: \_\_\_\_\_

Did you refinance a home this year? Yes \_\_\_ No \_\_\_

If yes, please bring the Closing Disclosure and purpose for funds, if cash out.

Did you pay or receive Alimony this past year? Yes \_\_\_ No \_\_\_

If yes, ex-spouse's **legal** name, SSN, and date of divorce finalization: \_\_\_\_\_

I affirm that all typed/hand-written information on this checklist is correct to the best of my knowledge:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_