



Full Name _____

Date of Birth _____

Spouse's Name _____

Spouse's DoB _____

Social Security # _____

Spouse's SSN _____

Street Address _____

Suite _____

City & State _____

Zip Code _____

Dependents - Full Name, Date of Birth and Social Security Number

_____ *name* *date of birth* *social security number*

_____ *name* *date of birth* *social security number*

_____ *name* *date of birth* *social security number*

Email _____

Preferred Ph _____

Spouse's Email _____

Sp Pref Ph _____

_____ Authorization to email tax information & returns

_____ Authorization to text reminders

Initial or enter "opt out"

Initial or enter "opt out"

Business

Legal Name of Entity _____

Federal Tax ID # _____

Primary Phone # _____

Street Address _____

Suite _____

City & State _____

Zip Code _____

Website _____

_____ Authorization to email tax information & returns

Initial or enter "opt out"

_____ *Client Signature & date*