

“PREVIOUS YEAR CLIENTS ONLY ” - Please complete so that we have your most current information on file.

First Name / Last Name _____

SS# / Date of Birth _____

Spouse First Name / Last Name _____

SS# / Date of Birth _____

Current mailing address _____

Apt # _____

City /State / Zip Code _____

Cell Phone# for calls/texts:

Email address:

Did you pay for health insurance? Yes_ (1095A) No_ / Internet Virtual Currency during tax year? Yes _No_

Students! Scholarship amount was used for fees, books or supplies \$ _____ Scholarship amount included in your W2 income \$ _____

Claiming Dependents? Yes _ or No _ If yes, are they SAME dependents as last year? Yes _ No_ (if no, make add or delete below)

Dependents name First/Last	DOB	SS#	Relationship	# of months in home	Student (S) Or Disabled (D)
ADD					
REMOVE					

Not only are we your Accountant, but we're also experienced Realtors. Let us leverage our trust and proven track record to assist you when you are ready to sell or buy real estate!

Do you or anyone you know plan to buy or sell a home or investment property this year?
Yes _ or No _

Name of referral _____

Email/Phone# _____

