

CLIENT INFORMATION SHEET

Name: _____ Spouse: _____
Date of Birth: _____ Date of Birth: _____

DEPENDENTS:

NAME	Date of Birth	S.S. # (NEW DEPENDENTS ONLY)

ADDRESS _____ CELL PHONE _____
_____ EMAIL _____

*If you have moved out of state, please list the date that you moved from your prior state: _____

DRIVER'S LICENSE INFORMATION

Link to locate Document #: <https://www.clearedtodrive.com/what-is-my-new-york-document-id-number/>

License #		STATE:	NY ONLY DOCUMENT #	
ISSUE DATE			EXP DATE	

SPOUSE License #		STATE:	NY ONLY DOCUMENT #	
ISSUE DATE			EXP DATE	

BANKING INFORMATION

***Bank information is needed for refund.** If bank info. is the same as last year, click/check here:

UPDATED BANK ACCOUNT # _____ ROUTING # _____

PAYMENT OPTIONS

****Please note that payment must be submitted with your tax documents****

Please click/check off how you will be arranging your payment:

check Venmo (@kevin-wilson-192) Zelle (kevinwilsoncpa@gmail.com) cash credit card (below)

You may list your credit card information below or call it into our office.

CARD NUMBER		EXPIRATION DATE	
SECURITY CODE		ZIP CODE (where billed)	

****New Clients ONLY**** you must include a copy of your prior year's Income Tax Return

Also, kindly let us know who referred you to us: _____