



CLIENT QUESTIONNAIRE

New client(s): Yes____ or No____

Filing Status: Single____, Married Filing Joint____, Married Filing Separate____, Head of Household____

<i>Taxpayer</i>	<i>Spouse</i>
First Name:	First Name:
Middle Initial:	Middle Initial:
Last Name:	Last Name:
Social Security Number:	Social Security Number:
Date of Birth:	Date of Birth:
Occupation:	Occupation:
Company(SE only):	Company(SE only):
Cell Phone: _____ Text Message: Yes____ or No____ Newsletter: Yes____ or No____	Cell Phone: _____ Text Message: Yes____ or No____ Newsletter: Yes____ or No____
Home Phone:	Home Phone:
Email:	Email:

Address: _____

City: _____ State: _____ Zip Code: _____

Dependents

<u>Full Name</u>	<u>Social Security Number</u>	<u>DOB</u>	<u>Relationship</u>	<u>Disabled(yes or no)</u>

Direct Deposit Information: Free! You can choose Direct Deposit even if not filing electronically.

Tax preparation fees are due at time of filing. Payment methods accepted are cash, check, or credit cards.

Name of Bank: _____ Checking:____ or Savings:_____

Routing Number: _____ Account Number: _____

REFUND TRANSFER____FAST CAST ADVANCE UP TO \$7,000*____FAST FORWARD by SBTPG____

Sign & Date: _____