

**INSTRUCTIONS: FILL OUT THE FORM ENTIRELY AND SUBMIT TO APPLE TAX & ACCOUNTING SERVICE
WITH YOUR TAX DOCUMENTS FOR ACCURATE TAX PREPARATION**

Individual Tax Client Information Worksheet for TAX YEAR: _____

Taxpayer Name	First		MI		Last		(Maiden)		
Spouse Name	First		MI		Last		(Maiden)		
Taxpayer Info:	DOB		SS#		Occupation				
Spouse Info:	DOB		SS#		Occupation				
Home Street Address								Unit/Apt#	
City					State		Zip Code		
Home Phone Number					Best way to contact you(email/hm/wk)				
Taxpayer: Work/Alternate Phone					Email				
Spouse: Work/Alternate Phone					Email				
Filing status(check one)		<input type="checkbox"/> Single	<input type="checkbox"/> MFJ	<input type="checkbox"/> MFS	<input type="checkbox"/> Head of Household	<input type="checkbox"/> Widow(er) w/child			

First	MI	DEPENDENT(S) Last	SS#	DOB	Grade	# months in home	relationship

Direct Deposit/Withdrawl?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Account Type	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	If payment is due, indicate date of eft pymt	
Bank Name		Routing#		Acct#	

Please fill out the following items, if applicable:

****DROP OFF CLIENTS ONLY****		Do you prefer to make an appointment to review your tax return before e-filing and printing the final return? <input type="checkbox"/> YES, call me when it is ready to review <input type="checkbox"/> NO, please e-file immediately					
Taxpayer:	Alimony paid		Alimony received		From/To: (First, MI, Last)		SS#
Spouse:	Alimony paid		Alimony received		From/To: (First, MI, Last)		SS#
Name of Taxpayer's Company (only if an OWNER)					Type	<input type="checkbox"/> S Corp <input type="checkbox"/> C Corp <input type="checkbox"/> LLC/LLP <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Prop.	
Name of Spouse's Company (only if an OWNER)					Type	<input type="checkbox"/> S Corp <input type="checkbox"/> C Corp <input type="checkbox"/> LLC/LLP <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Prop.	