



DROP OFF CHECKLIST

DATE: _____

CLIENT NAME: _____ PHONE _____

SPOUSE NAME: _____ PHONE _____

CURRENT ADDRESS: _____

DID YOU HAVE A BABY IN 2021? ____ Y ____ N

IF YES: WE NEED COPY OF ____ SS CARD

____ BIRTH CERTIFICATE

DO YOU HAVE IRS LETTER 6475 CONCERNING STIMULUS CHECK JAN 2021? _____

IF YOU RECEIVED CHILD TAX CREDIT DO YOU HAVE LETTER 6419 FOR THAT? _____

DO YOU RECEIVE HEALTH INSURANCE FROM MARKET PLACE? Y N FORM 1095A Y N

DID YOU RECEIVE SELL SEND EXCHANGE OR OTHERWISE ACQUIRE ANY VIRTUAL CURRENCY IN 2021? _____ DO YOU HAVE THE STATEMENTS FOR THEM? _____

DID YOU BUY A HOME OR SELL A HOME IN 2021? _____

WAS THE TAXPAYER OR SPOUSE A MEMBER OF THE U.S. ARMED FORCES AT ANY TIME IN 2021? ____ Y ____ N IF YES WHICH ONE? _____

DID YOU RECEIVE A PPP LOAN/OR BUSINESS GRANT? Y OR N AMT _____

ANY CASH DONATIONS? Y OR N AMOUNT _____ RECIEPTS? _____

ARE YOU WAITING FOR ANY INFORMATION NEEDED TO COMPLETE YOUR TAX RETURN ? _____

NOTES: _____

SIGNATURE: _____ DATE: _____

****NEED COPY OF DRIVERS LICENSE****



NEW CLIENT DROP OFF CHECKLIST

DATE OF DROP OFF: _____

NAME: _____ DOB: _____ SS#: _____

SPOUSE: _____ DOB: _____ SS#: _____

ADDRESS: _____

PHONE: _____ SPOUSE PHONE: _____

COPY OF DRIVERS LICENSE? _____ TAXPAYER _____ SPOUSE

_____ COPY OF LAST YEARS TAX RETURN

DO YOU HAVE CHILDREN? ____ Y ____ N

CHILD NAME: _____ DOB: _____ SS# _____

CHILD NAME: _____ DOB: _____ SS# _____

CHILD NAME: _____ DOB: _____ SS# _____

NOTE WE REQUIRE COPIES OF CHILDRENS BIRTH CERTIFICATE AND SOCIAL SECURITY CARD