

CLIENT INFORMATION SHEET



TAX YEAR IF NOT 2024 _____

TAX RETURN TYPE IF NOT 1040 _____

NAME: _____
 Phone: _____ (home/cell/work)
 Email: _____
 Joint Name: _____
 Phone: _____ (home/cell/work)
 Email: _____

Address: Same as last year? Yes If No, New Address: _____

What is your preferred method of contact? Phone Email

Are you a new client? No If Yes, How did you hear about us? _____

Client Copy: Paper Copy (sign paper form and pickup in person)
 (Fee for copy requests later.)
 Digital PDF (DocuSign – separate email required for each signer)
 Paper & Digital PDF **\$5.00 fee** (DocuSign & pickup in person or mail)

Pickup Documents: In Person **OR** Mail (fee applies) **OR** N/A

Dependent Changes: No If Yes, Explain: _____

If you receive a refund, would you like it direct deposited? Yes No Checking

If yes, same financial institution as last year? Yes No Saving

Institution: _____ Routing: _____ Account: _____

Did you buy or sell any virtual currency in 2024? Yes No

Did you pay your estimates? Federal - Amount: _____ State - Amount: _____ No
 (Please provide proof when submitting tax documents)

For Office Use Only: Engagement Letter: _____ PC/QB: _____ Circle: GH or Muskegon

	Date	Initials		Date	Initials
Date In:			DL:		
Date out:			DL (spouse):		
Prepare:			PD: \$/ck/cc		
Review:			8879 Rec'd:		
DocuSign sent:			E-file Sent:		
DS accepted:			E-file Accept:		

Notes: _____
