



**2021 Tax Year DROP-OFF CHECKLIST**

Drop Off Date: \_\_\_\_\_

**Name:** \_\_\_\_\_ **Spouse Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Spouse Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Spouse Email:** \_\_\_\_\_

**Preferred Contact Method:** Text \_\_\_ Call \_\_\_ Email \_\_\_

**Preferred Tax Professional:** First Available \_\_\_ Specific Professional: \_\_\_\_\_

**When would you like for your tax return to be ready?** ASAP \_\_\_ Within 1 week \_\_\_ No rush \_\_\_

**Tax Return Pick Up & Sign Method:** Online \_\_\_ In-Office: Receptionist \_\_\_ Appointment \_\_\_

**\*\*\*Amount received for the 3<sup>rd</sup> Stimulus (EIP 3) (total received – max \$1400 each):** \_\_\_\_\_

**\*\*\*Amount received for the Advance Child Tax Credit Payments (total):** \_\_\_\_\_

**\*\*\*Amount of cash/check/credit donations to church or charity during 2021:** \_\_\_\_\_

**CLIENT INFORMATION**

**Previous clients: Any changes from last year?** Y \_\_\_ N \_\_\_ (if yes, please enter them below)

**Physical Address:** \_\_\_\_\_ **Date Moved:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Marital Status:** Single \_\_\_ Married \_\_\_ Widowed \_\_\_

**Date of Birth:** \_\_\_\_\_ **Spouse Date of Birth:** \_\_\_\_\_

**SSN# or ITIN:** \_\_\_\_\_ **Spouse SSN# or ITIN:** \_\_\_\_\_

**Can you be claimed as a dependent by someone else?** Y \_\_\_ N \_\_\_

**DEPENDENTS\*** (or person living in your household that you are eligible to claim)

Name	Relationship	Date of Birth	SSN# or ITIN	# of Months Lived With You	Full-Time Student?

\* If any dependents listed did not live at the primary taxpayer's address the entire year, please discuss this with your tax professional. This is critical to help us help you accurately report your residency and dependency to the taxing authorities.

**Refund Method Preferred:** Check mailed to home \_\_\_ Direct Deposit \_\_\_ Debit Card\* \_\_\_

If Direct Deposit selected, enter current account information:

**Routing Number:** \_\_\_\_\_ **Account Number:** \_\_\_\_\_ **Checking** \_\_\_ **Savings** \_\_\_

**Are you interested in the Preparer Fees being taken out of the refund, if applicable?** Y\* \_\_\_ N \_\_\_

\*additional \$39 fee may apply

