Basic Information Tax Year _____

riling Status:SingleMarr	_	married Filing SeparateQualifying W	idow
Name Taxpayer:			
First Spouse:	Middle 	Last	
Social Security #: Taxpayer :	·	Spouse:	
Address:	 -		
Phone #:Taxpayer Home:	Cell:	Occupation	
Spouse: Home:	Cell:	Occupation	· · · · · · · · · · · · · · · · · · ·
Email Address Taxpayer: Spouse:			
DL Number Issue Taxpayer Spouse			Date of Birth
Dependent (Make Sure you put the	relationship Type S	5on, Daughter, Parent, C	ther)
First Name Last Name	Date of Birth	Social Security #	Relationship
Did you have any Bitcoin or any	other Crypto Curi	rency Transaction? _	
Did You Pay Alimony? To Whom Date of Divorce?/	? _/	Amount?	
Would you like for us to pay fo	r your return thru	Credit or Debit Card	d?Yes
Card #:	Exp Date:	CVV:	Zip: