



Tax Return Intake Form

PLEASE fill out COMPLETELY – BOTH sides– please don’t assume we have everything – it is MUCH easier to have it all in one place right in front of us while processing your return. Many times addresses change and we don’t know it, or names change or living situations change etc.

1. **Name(s):** _____

2. **Address:** _____

Town _____ **State:** _____ **Zip:** _____

3. **Please provide your preferred method of contact:**

Mobile Phone: _____

Home Phone: _____

Email: _____

- Do you need to speak with Steve before your return is prepared? _____
- Do you want to arrange a virtual meeting with Steve? _____
- Were any children born/added to your family this year who you will be claiming? If yes, please be sure to provide their social security number(s).
- Did you provide proof of Health Insurance in your tax documentation (form 1099HC)? If not, please provide health insurance provider and account number and months of 2020 you had this and/or any other Health insurance:

- Amount of stimulus monies received for all household members covered under this return (ie: husband, wife, minor children)

Stimulus #1 _____ Stimulus #2 _____
- **Please continue to back of page**

- **Current bank information for direct deposit – only needed if different from last year or if you are a new customer: If filing a joint return, bank account must be a joint account.**

Bank name: _____ **Account type:** _____

Account number: _____ **Bank Routing Number:** _____

- **Preferred method of receiving your return when it is complete: Circle one**
Priority US Mail with Tracking Secure email In Person