

CLIENT INFORMATION WORKSHEET

Name (as shown on Social Security Card) _____ SSN _____

Birth date _____

Spouse Name (as shown on Social Security Card) _____ SSN _____

Birth date _____

Current Mailing Address _____

Best Contact Phone Number: _____

Name (as shown on Social Security Card), Birthdate, Social Security Number of **dependent(s)** you supported this year:

Routing Number for direct deposit _____ (as shown on a check, NOT deposit slip)

Account Number for direct deposit _____ (Checking or Savings – please circle)

Please include the following income documents:

1. All W-2 forms for wages, W-2G forms for gambling winnings, unemployment payments for the year and state tax refunds.
 2. All 1099-INT, DIV forms for interest and dividends received for the year.
 3. All 1099-R and SSA forms for retirement and social security benefits distributions.
 4. All 1099-B statements for brokerage and investment account activity.
 5. All 1099-MISC statements for rents, non-employee compensation and other income.
 6. Worksheets for business income and expenses, personal expenses, rental property income expenses, etc. Please see website for worksheets.
 7. If you are a new client, please include a copy of the last year you filed your tax return – both personal and business, if applicable.
 8. Please list any questions/concerns _____
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Kat & Bud Enterprises, LLC ~ Kathryn S. Tracy, Accountant
2144 S. 227th Ave, Buckeye, AZ 85326
Office: 623-386-4674 ~ Fax: 623-386-1130

Email: kathrynstracy@gmail.com ~ Website: www.kathrynstracy.com
Forms website: www.my1040pro.com/kathrynstracy