2024 Tax Organizer

General Information

Full Name:			
Social Security Number:	Occupation:		
Date of Birth:	Age: Legally blind:		
Home/cell phone:	Best time to call:		
E-mail:			

• For new clients, please provide copies of social security cards and driver's licenses or state ID card.

Complete Address:		
County name:	School district:	
Resident state:	Non-resident state:	

Marital status: Married Single Divorced Separated Widowed

Income

• Please list all employers below. Enclose a copy of each W-2, as well as any statements from your employer(s) showing benefits withdrawn from your pay during the year. Also, enclose your final paycheck stub for the year if you have it available.

Employer	Employer

- Do you have income from any other source? _____ If so, please list below.
- Did you pay tuition and fees? _____ If so, please enclose 1098-T from the college.
- How much rent did you pay last year? Did it include heat?

Direct Deposit

• If you want your refund to be directly deposited into your account, please list the information below and enclose a voided check. (Do not use a deposit ticket. Many times they have an internal routing number instead of an official routing number.)

Name of bank:	 Please circle:	savings or checking
Routing number:		
Account number:		

The information listed on this form is accurate to the best of my knowledge. (Please sign below).

Taxpayer