



CLIENT INFORMATION SHEET-2022 (TY 2021)

MARTIAL STATUS:		SINGLE <input type="checkbox"/>	MARRIED
New clients, how did you hear about us?		Who referred you?	
		Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>
1. Can someone claim YOU as a dependent?		<input type="checkbox"/>	<input type="checkbox"/>
2. New for 2021 Did you make CASH Charitable Donation(s) totaling \$300 or more during the year?		<input type="checkbox"/>	<input type="checkbox"/>
3. Did ANYONE in your household have HEALTH INSURANCE through the Marketplace?		<input type="checkbox"/>	<input type="checkbox"/>
If Yes, do you have FORM 1095-A? We will need it to complete your tax return		<input type="checkbox"/>	<input type="checkbox"/>
4. Did you receive Unemployment Benefits?		<input type="checkbox"/>	<input type="checkbox"/>
If Yes, do you have FORM 1099-G? We will need it to complete your tax return		<input type="checkbox"/>	<input type="checkbox"/>

TAXPAYER INFORMATION				SPOUSE INFORMATION			
Name (First, Initial, Last Name)				Name (First, Initial, Last Name)			
SSN		Date of Birth		SSN		Date of Birth	
Driver License/State ID #	State	ISS Date	Exp Date	Driver License/State ID#	State	ISS Date	Exp Date
Occupation			Disabled <input type="checkbox"/>	Occupation			Disabled <input type="checkbox"/>
Cell Phone	Alternate Phone			Cell Phone	Alternate Phone		
May we contact you by text message? Yes <input type="checkbox"/> No <input type="checkbox"/>				May we contact you by text message? Yes <input type="checkbox"/> No <input type="checkbox"/>			
E-Mail Address				E-Mail Address			
Mailing Address			Apt/Lot #	City		State	Zip
Did you live at this address all year? Yes <input type="checkbox"/> No <input type="checkbox"/>							

DID YOU RECEIVE THE 3RD STIMULUS PAYMENT?	How much for the Year
STIMULUS Money? (Taxpayer, Spouse or Child)	
1. The 3rd round of stimulus payments (\$1400) were issued starting in March 2021 thru December 2021. How much did you receive?	\$ _____
2. Did you receive Advance Child Tax Credits July thru December? How much?	\$ _____

DEPENDENT INFORMATION						
Same as Last Year <input type="checkbox"/>						
First Name, Initial, Last Name	Dependent's SSN	Relationship	# of months in home	Date of Birth	Disabled <input checked="" type="checkbox"/>	College Student <input checked="" type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

(Over)

DID YOU RECEIVE ANY OF THE FOLLOWING INCOME OR EXPENSES? (✓All that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> Wages - W2's _____ | <input type="checkbox"/> Gambling Winnings | <input type="checkbox"/> Medical Expenses |
| <input type="checkbox"/> Unemployment | <input type="checkbox"/> Sale of Virtual Currency | <input type="checkbox"/> Rent (Complete Rent Info below) Mortgage |
| <input type="checkbox"/> Social Security Benefits | <input type="checkbox"/> Sale of Real Estate | <input type="checkbox"/> Interest |
| <input type="checkbox"/> Self- Employment (Complete SE Form) | <input type="checkbox"/> Sale of Stocks | <input type="checkbox"/> Real Estate Taxes |
| <input type="checkbox"/> Pension & Annuities | <input type="checkbox"/> Child Care Expenses | <input type="checkbox"/> Charitable Donations _____ |
| <input type="checkbox"/> Interest | <input type="checkbox"/> College Tuition | <input type="checkbox"/> Energy Efficient Purchases |
| <input type="checkbox"/> Dividends | <input type="checkbox"/> Student Loan Interest | <input type="checkbox"/> Out of State Purchases |
| <input type="checkbox"/> Injured Spouse, If so which spouse owes the debt: _____ | <input type="checkbox"/> PPP Loan Forgiveness (Self Employed Only) | |

I agree to receiving automated phone calls and/or text messages at the phone numbers provided above about my tax returns and future reminders/offers (Not a condition for purchase).

Paula's Sav Tax Inc will prepare your federal and state income tax returns based on the information you furnish to us. It is your responsibility to provide all the information necessary to complete your tax returns. You will retain all necessary supporting documentation should it be required for an audit examination at a later date either by the IRS or state. You acknowledge that should you receive letters from the IRS or State requesting more information that the Tax Prep fees do not cover this and you will be required to pay separate fees at \$50/hr. If your income tax refund is kept by the Internal Revenue Service (IRS) to be applied to a prior debt, you agree to pay \$100 to settle your account.

REFUND AND PAYMENT INFORMATION

How would you like to pay for our services?	Cash	Check	Credit Card	Debit Card	Deduct from Refund (Additional Fees Apply)	
How would you like to receive your Refund?	Standard Mail	Direct Deposit	Refund Advance (Prepaid Card	Direct Deposit	Check)
If you owe IRS, State or City taxes, how would you like to pay?	Check	Direct Debit				

Bank Information: Bank Name _____ Routing No _____
Account # _____ Checking Savings

All bank products are subject to Bank fees and approval by the bank. PAULAS SAV TAX INC cannot promise or guarantee that you will receive a bank product on your refund because it is subject to Bank & IRS Regulations. PAULAS SAV TAX INC is only a facilitator.

By completing and submitting this form you certify that you would like your taxes prepared according to the information provided above and acknowledge that there is a minimum consultation fee of \$40 (which can be waived should you file your taxes with PAULAS SAV TAX INC).

Signature: _____

Date: _____