

CLIENT DATA SHEET

1533 Cajah Mountain Rd Hudson, NC 28638 828-396-7165

NAME ADDRESS		Home Cell	PHONE NO
		Email	
REQUIRED INFO	RMATION IF NEW CLIENT,		
WE NEED A COPY OF ALL SOCIAL SECURITY CARDS AND A VALID DRIVER LICENSE FOR TAXPAYER & SPOUSE			
	ALSO A COPY OF LAST YEARS TAX RETURN IF AVAILABLE NAME SS#		DATE OF BIRTH
Taxpayer:	•		
Spouse:			
Dependents:	·		
Child Under 17	**Required by IRS to provide documentation that of		• •
ANY ONE IN COLLEGE YES NO (If Yes, please provide Form 1098-T from school)			
WERE ANY OF THE ABOVE COVERED BY MARKET PLACE INSURANCE LAST YEAR?			
	YES NO		
IF YES: YOU MUST HAVE THE 1095A FORM			
FOR 2021:	Did you receive the \$1400.00 Economic Stimulus F	Payment?	YES NO
	If YES: Amount Received		
Has your Filing Status Changed from 2020: (for example: filed Single in 2020, but filing Married in 2021)			
YES NO If YES, explain:			
DID YOU RECEIVE THE ADVANCE CHILD TAX CREDIT, IF SO WE NEED TAX FORM RECEIVED FROM IRS			
FOR 2021 you are able to deduct \$300/\$600 MFJ cash payments to qualified non-profit, even if you do not itemize.			
Please Provide information including Charity name(s), dates, and Amount(s) donated.			
DO YOU CERTIFY THAT NO CONSUMER USE TAX IS DUE TO NORTH CAROLINA			
IF RECEIVING A REFUND, IS IT GOING TO OR THROUGH AN ACCOUNT OUTSIDE OF THE UNITED STATES YES NO			
DO YOU WANT TO DIRECT DEPOSIT SAME ACCOUNT AS LAST YEAR			
	YES NO	YES	NO
IS TAXPAYER A V	VETERAN? IS SPOUSE A VETERA	N?	
AT ANYTIME DURING 2021 DID YOU DEAL IN ANY VIRTUAL CURRENCY YES NO			
	Variation and the first that information are seen		
You are responsible for the information on your return, please provide complete and accurate information.			
SIGNAT			
			DATE