JEFFERSON FINANCIAL SERVICES CLIENT INFORMATION WORKSHEET

TIME OF ARRIVAL: ____________ NEW CLIENT? YES / NO APPOINTMENT TIME:________________ WALK IN# _________

FILING STATUS: □SINGLE □HEAD OF HOUSEHOLD □MARRIED FILING JOINT □MARRIED FILING SEPERATELY □WIDOW/ER

TAXPAYER	***SPOUSE***
NAME:________________________________D.O.B._____/_____/______	NAME:________________________________D.O.B._____/_____/______
SSN:______/______/______ CDL__________________________________	SSN:______/______/______ CDL__________________________________
OCCUPATION:____	OCCUPATION:____

STREET ADDRESS: ________________________________APT#_______CITY____________________________STATE_________ZIP___________

HOME PHONE: (_____)______-____________ ALT PHONE:(_____)______-____________ EMAIL:_______________________________

Dependent 1	***Dependent 2***	***Dependent 3***
First Name:______________________________	First Name:______________________________	First Name:______________________________
Middle: ______________________________	Middle: ______________________________	Middle: ______________________________
Last Name:______________________________	Last Name:______________________________	Last Name:______________________________
Relationship: ___________________________	Relationship: ___________________________	Relationship: ___________________________
D.O.B. _______/_______/__________	D.O.B. _______/_______/__________	D.O.B. _______/_______/__________
SSN _______/______/___________	SSN _______/______/___________	SSN _______/______/___________
ChildCare Expenses: $________________	ChildCare Expenses: $________________	ChildCare Expenses: $________________
Name of Provider:_________________________	Name of Provider:_________________________	Name of Provider:_________________________
Address:_______________________________	Address:_______________________________	Address:_______________________________
City,State, Zip___________________________	City,State, Zip___________________________	City,State, Zip___________________________
Tax Id# or SSN__________________________	Tax Id# or SSN __________________________	Tax Id# or SSN __________________________
Phone: _______________________________	Phone: _______________________________	Phone: _______________________________

IF ANTICIPATING A REFUND HOW WOULD YOU LIKE TO FILE YOUR RETURN?

Would you like Direct Deposit? Yes No Bank Routing # __________________________ Acct#____________________________________

□ RAL- Refund Anticipation Loan. If Approved expect your refund in 24hours. Additional Fees Required But are not paid Upfront.

□ EFILE- Taxes are electronically sent to the IRS. Expect your refund in 7-14 Days. Additional Fee: $25 If efiling Fed or State. $40 for both.

□ Mail Return- You must mail your return to the IRS and Franchise Tax Board. Expect a Refund in approximately 8 weeks. No additional fees.

Are you prepared to pay for your taxes today? Yes No

I authorize Jefferson Financial Services to Prepare and Process my Income taxes. All of the information provided is accurate to the best of my knowledge.

Your Signature_____________________________________ **Date**______________ **Referred By**________________________________

Office Use Only

Intake __________ ***Data Entry***______ ___________

JEFFERSON FINANCIAL SERVICES

This form is an inventory of documents that you have provided us with to prepare your tax return. You are responsible for providing us with all of the required documents needed to properly file your tax return. Your signature below certifies that these are the only forms that you have given to Jefferson Financial Services.

# of forms	Form name or Description of Form	Employer or Company Name	
	Form W-2 (Wage and Tax Statement)		
	Form 1099 Int (Interest Income)		☐
	Form 1099-Div (Dividend Income)		☐
	Form 1099-R (Pension & IRA Distribution)		☐
	Form 1099-Misc (NonEmp Comp/Rental/Royalty)		☐
	Form SSA 1099/Social Security Benefits		☐
	Form 1099-G (Unemployment/State Refund)		☐
	Form W-2G (Gambling Winnings)		☐
	Form 1098-E (Student Loan Interest)		☐
	Form 1099-B (Brokering)		☐
	Form-S (Sale of Real Estate)		☐
	Schedule K (Partnership Income)		☐
	Non-Cash Charitable Contribution		☐
	Property Tax Statement		☐
	Mortgage Interest Statement		☐
	W-10 or ChildCare Expenses		☐

Other Documents not Listed Above

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Taxpayer's Signature

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Spouse's Signature