



Jefferson-Franklin Tax Services

YOUR TAXES: Planned. Prepared. Solved!

Main: 623.240.9545 | Toll-Free Fax: 866.779.5210 | Email: info@jeffersonfranklintax.com

CLIENT INFORMATION SHEET

DATE _____ APPOINTMENT TIME _____ ASSOCIATE _____

NEW CLIENT Y / N

HOW DID YOU HEAR ABOUT US? _____

TAXPAYER INFO:	SPOUSE INFO:
FIRST NAME:	FIRST NAME:
MIDDLE INITIAL:	MIDDLE INITIAL:
LAST NAME:	LAST NAME:
SOCIAL SECURITY #:	SOCIAL SECURITY #:
DATE OF BIRTH:	DATE OF BIRTH:
OCCUPATION:	OCCUPATION:
CELL PHONE:	CELL PHONE:
HOME PHONE:	HOME PHONE:
E-MAIL ADDRESS:	E-MAIL ADDRESS:

ADDRESS INFORMATION			
ADDRESS:			UNIT #:
CITY:	STATE:	ZIP CODE:	

DEPENDENT INFORMATION		
FIRST NAME:	FIRST NAME:	FIRST NAME:
M.I.:	M.I.:	M.I.:
LAST NAME:	LAST NAME:	LAST NAME:
SSN:	SSN:	SSN:
DOB:	DOB:	DOB:
RELATION:	RELATION:	RELATION:

BANKING INFORMATION (ONLY FOR DIRECT DEPOSIT OF REFUND)	
BANK NAME:	BANKING INFORMATION PROVIDED IS USED FOR DIRECT DEPOSIT OF A TAX REFUND. ONE DIRECT DEPOSIT REFUND IS ALLOWED PER BANK ACCOUNT OR A PAPER CHECK CAN BE MAILED TO YOUR ADDRESS BY INDICATING BELOW
CHOOSE ONE: <input type="radio"/> CHECKING <input type="radio"/> SAVINGS	
ROUTING #:	
ACCOUNT #:	
	<input type="radio"/> PAPER CHECK

MY SIGNATURE BELOW AUTHORIZES JEFFERSON FRANKLIN TAX SERVICES TO ELECTRONICALLY FILE MY FEDERAL AND STATE INCOME TAX FORMS. THIS DOCUMENT IS AN ACKNOWLEDGEMENT THAT JEFFERSON FRANKLIN TAX SERVICES WILL REPORT ALL DOCUMENTED MATERIAL AS IT IS PROVIDED UNDER PENALTIES OF PERJURY. I DECLARE THAT I AM LIABLE FOR INFORMATION PROVIDED. I UNDERSTAND THAT I AM RESPONSIBLE TO RETAIN SUPPORTING DOCUMENTATION AND JEFFERSON FRANKLIN TAX SERVICES MAY NOT RETAIN RECORD OF ALL DOCUMENTATION SUBMITTED. I PROMISE TO EXAMINE MY RETURN TO ENSURE THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THEY ARE TRUE, CORRECT AND COMPLETE.

NOTE: UPON TRANSMISSION AND ACCEPTANCE OF YOUR DOCUMENTATION BY THE IRS, YOUR ESTIMATED REFUND IS EXPECTED TO BE RECEIVED BY A SCHEDULED TIME DETERMINED BY THE IRS. JEFFERSON FRANKLIN TAX SERVICES IS IN NO WAY LIABLE FOR VARIANCES IN REFUND AMOUNTS OR REFUNDS NOT DEPOSITED AT THE EXPECTED TIME AS INDICATED BY THE PUBLISHED SCHEDULE.

TAXPAYER SIGNATURE _____

DATE _____

SPOUSE SIGNATURE _____

DATE _____

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www.jeffersonfranklintax.com