

Client Tax Questionnaire 2024

Taxpayer Information		Spouse Inform	nation		
First Name		First Name			
MIddle Name		MIddle Name	2		
Last Name		Last Name			
SSN		SSN			
Occupation		Occupation			
Date of Birth		Date of Birth			
Mobile #		Mobile #			
Email Address		Email Addres	Email Address		
Address					
Street					
City		State	Zip		
Resident of Texas as of 12/31?					
<u>Dependents</u> First Name	Last Name	SSN	Date of Birth	Relationship	

Banking Information

Name of Institution

Bank Account #

Routing #

Type of Account