

ACCOUNTING PLUS LLC -
TAX DROP OFF FORM
PERSONAL TAX INFORMATION FOR **TAX YEAR 2021**

<i>For Office Use/ Date Received</i>

1. Did we do your 2020 return **YES or NO** (If no please include a copy & copies of SS cards & DL)
2. Have we done your taxes in the last 4 years **YES or NO**
3. **Do you also have an appointment: If yes, when:** _____

	TAXPAYER	SPOUSE
NAME		
SOCIAL SECURITY #		
DATE OF BIRTH		
OCCUPATION		
PHONE #		
E-MAIL ADDRESS		
STREET ADDRESS:		
CITY:	STATE:	ZIP:
COUNTY:	TOWN OF:	SCHOOL DIST:

DEPENDENTS

Full Name (First, Initial & Last)	Relationship (Son, Daughter, etc.)	Date of Birth	Social Security Number	Months Lived with you in 2020	Claiming as Dependent	Claiming for EIC	Had Income over \$2000?

CHILD & DEPENDENT CARE CREDIT

Name of Care Provider/ Facility	Address	Social Security # or EIN	Amount Paid

EDUCATION

Student Loan Interest (include form 1098-E)	College Tuition (include form 1098-T)	Books & Materials	Year in College (Freshmen, Sophomore, Etc.)

How much did you receive from Federal Stimulus? (\$1400 in March of 2021)	
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DIRECT DEPOSIT INFORMATION

Bank Name	Checking or Savings	Routing Number	Account Number

_____ I would rather my refund be mailed to me (May take up to 3 extra business days)

