**CLIENT INFORMATION/UPDATE/DROP-OFF SHEET**

**TAXPAYER ­SPOUSE**

**Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SS# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Please check which phone number is the best to reach you during reg. business hours)**

**E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Please mark which e-mail we can send notices and newsletters to)**

**Do you want to have a refund, if any, directly deposited at no fee? You still need to mail your return yourself. (Yes) \_\_\_\_ (No) \_\_\_\_**

**Bank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Routing#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Account# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you want to E-file your return (at an add’l $100 minimum fee. Larger returns can be more)? (Yes) \_\_\_\_ (No) \_\_\_\_**

**-------------------------------------------------------------------------------------------------------------**

**Desired Completion Date: \_\_\_ Mail\_\_\_\_ Pickup\_\_\_\_ Email as pdf file & you mail \_\_\_\_**

**(If you choose to have it mailed, we charge between $5-15 depending on the size and weight)**

**Do you want a hard paper copy or pdf when completed or hard copy today and a pdf copy in May or June at an additional charge of $25-50.**

**Did you purchase, trade, or sell virtual currency? Yes\_\_\_\_ or No\_\_\_\_\_**

**I have health insurance thru the marketplace (Obamacare) Yes\_\_\_\_ or No \_\_\_\_**

**If yes, I have attached/included the 1095A for the completion of my taxes. Yes\_\_\_\_ or No \_\_\_\_\_**

**If not, I can’t finish your taxes.**

**Do you have a HSA (Health Savings Account)? Yes\_\_\_\_ or No\_\_\_\_. If yes, attach your 1099SA.**

**I understand that my desired pickup date will be the targeted completion time and when the return is completed and ready for pickup, the office will call/e-mail me and let me know of its completion. Please do not call the office before that desired date.**

**I certify that I have reviewed and have completed the Reminder Checklist for completion of my tax return and that it is complete.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Burchett Financial Service Agent Client**

**Dropped off and signed on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Log #\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date**

**------------------------------------------------------------------------------------------------------------------------------**

**NEW CLIENTS ONLY**

**How did you find out about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dependent Information: \*if additional space needed put on back.**

**Full Name SS# Date of Birth**\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_M/F**