

2018 Tax Return Drop Off Information Sheet

Ph. (Home): _____ **Ph (other):** _____ **Date:** _____

Name: _____

Spouse: _____

Any changes in address, occupation, marital status or dependents? Y / N

New Address: _____

Date Moved: _____ **New Marital Status:** _____

New Occupation: TP _____ SP _____

Name: _____ **New Dependent**
SSN _____ **BD** _____

IF YOU HAVE A REFUND DO YOU WANT DIRECT DEPOSIT: Y / N

Same as last year? Y / N If not, enter new banking below.

Bank: _____ **RTN** _____ **Acct #** _____

Circle: Checking Savings (include copy/voided check or savings card if new)

DO YOU HAVE ANY EMPLOYEE BUSINESS EXPENSES? Y / N

Such as **Union dues, uniforms**, tools, supplies, protective clothing, mileage, etc.

EDUCATION EXPENSES

Education expenses for you or your dependent? (include Form 1098-T) Y / N

Student loan interest? Y / N

DAYCARE EXPENSES

Daycare expenses for dependent? (include provider statement) Y / N

HEALTH INSURANCE

Was everyone on your return covered by health insurance all year? Yes/No / Partial
If partial, dates covered:

Was your insurance obtained through the Health Insurance Market Place? Yes/ No
If Yes, then we need Form 1095-A to complete your tax return.

PROPERTY TAX REBATE

Do you want us to do your Property Tax Rebate if you qualify? Y / N
Please include paid receipts for March and July

PA USE TAX

Do you owe any unpaid sales/use tax to PA for out-of-state purchases (e.g., on internet)?

Yes / No If yes, total of untaxed purchases requiring sales tax.