

TravelTax Client Demographic and Itinerary Sheet

Data can be faxed, mailed or sent by courier. We will confirm receipt of you documents by email within 24 hrs.

Demographics

Name _____ SS# _____ DOB _____
 Spouse: _____ SS# _____ DOB _____
 Marital Status _____ Filing Separate? ___ Head of Household? ___ (check if applicable)
 Permanent Address _____
 Temporary Address _____
 Address to mail return: _____
 School District at above address (if applicable): _____ County: _____
 Phone: Main _____ Mobile _____ Fax _____
 Email Address _____
 Occupation _____ Spouses Occupation _____

Claiming Dependents? _____ (If yes, fill section below)

Dependents					
Name (first, last)	SSN#	Relationship	Months in home	Birthdate	Student?
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
List any child care expenses for each dependent _____					
List any employer reimbursements for expenses _____					
List any educational expenses for dependents including year in school _____					
Any custody agreements / issues that we should be aware of?? _____ Explain on separate sheet or available space.					

How did you hear about us? _____
 If you used an internet search engine, which one did you use? _____

Assumptions that we make unless **MARKED** otherwise (leave blank if acceptable):

- 1) We will have IRS and/or state taxing authorities contact us about any problems with your return _____
- 2) We will electronically file your returns (some states charge a fee for mailing returns) _____
- 3) You are not interested in contributing to political campaigns, environmental activities etc. _____

Please Initial _____