

# Angela's Tax Service, LLC

Date Received: \_\_\_\_\_

New Client:  Yes  No

Taxpayer's Name: \_\_\_\_\_

Spouse: \_\_\_\_\_

PH#: \_\_\_\_\_

PH#: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

SS#: \_\_\_\_\_

SS#: \_\_\_\_\_

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

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

Current Address: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

**Filing Status:**  Single  Married Filing Joint  Married Filing Separate  HOH  Qualifying Widower

Dependents:

Name:	Date of Birth:	Relationship to you:	SS#:

Were you a resident of CO all year?  Yes  No

If **NO**: Other State(s) of residency: \_\_\_\_\_

Date moved to CO: \_\_\_\_\_

Do you have an identity protection PIN number from the IRS?  Yes  No \*If Yes, please be sure to include\*

Do you have any of the following and are ALL the documents included and organized?

\*(Please note: There will be an additional charge of \$55/hr. to separate and organize receipts.)

Own you own business/Independent Contractor (Schedule C)

Rental Property (Schedule E)

Farm Income (Schedule F)

At any time during 2020, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) **located in a foreign country**?

Yes  No

At any time during 2020, did you receive, sell, send, exchange, or otherwise acquire any financial interest in any **virtual currency** (i.e. Bitcoin...)?  Yes  No

# Angela's Tax Service, LLC

At any time during 2020, did you have health insurance coverage purchased through the marketplace (i.e. Health First Colorado)?  Yes  No \*If Yes, we will need Form 1095A\*

If you receive a refund would you like it to be Direct Deposited?  Yes  No

\*If YES: ●Routing: \_\_\_\_\_  Checking  
●Account: \_\_\_\_\_  Savings

\*If NO: How would you like to receive your refund?

Via E1 Visa Card \*Please see brochure for Visa Card Details\*

Via Check

Would you like Angela's fee to be deducted from you refund?  Yes  No

\*(Please note: There is an additional fee for this service.)

\*\*If YES: Please answer ONE of the following security questions.

Mother's maiden name?

What high school you attended?

Name of your first pet?

Father's middle name?

Name of your oldest child

Answer: \_\_\_\_\_

\*For Returning Clients: Have there been any changes from the previous year's tax returns? If so, please give details: \_\_\_\_\_

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\*Notes for new clients: \_\_\_\_\_

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