

**TACTICAL TAX SERVICE**  
**CLIENT INTAKE SHEET FOR TAX YEAR \_\_\_\_\_**

**FILING STATUS:**

SINGLE     HEAD OF HOUSEHOLD     MARRIED FILING SEPARATE     MARRIED  
 (NOT MARRIED W/DEPENDENTS)

Did you have health insurance for the entire 2022 year? YES  NO   
 Did you obtain your health insurance through the Market Place  Employer  Self paid insured   
 Do you have your 1095 A  B  C

TAXPAYER FULL NAME AS IT APPEARS ON YOUR SS CARD:	SPOUSE NAME AS IT APPEARS ON SS CARD:
ADDRESS: _____ CITY _____ STATE _____ ZIP _____	ADDRESS: _____ CITY _____ STATE _____ ZIP _____
TELEPHONE NUMBERS: HOME _____ CELLULAR _____ WORK _____	TELEPHONE NUMBERS: HOME _____ CELLULAR _____ WORK _____
SOCIAL SECURITY NUMBER:	SOCIAL SECURITY NUMBER:
DATE OF BIRTH:	DATE OF BIRTH:
OCCUPATION:	OCCUPATION:
EMAIL ADDRESS:	EMAIL ADDRESS:
NOTES:	NOTES:

**DEPENDENTS**

DEPENDENT NAME	SSN#	DOB	RELATIONSHIP

CLIENT SIGNATURE: \_\_\_\_\_

REFERRED BY: \_\_\_\_\_

## INFORMATION FOR YOUR TAX PREPARER

Please Answer Each Question That Applies To You, Additional Space Provided If Needed

*Please answer Y (ye Yes) N (No)*

<b>INCOME INFO</b>	<b>DEDUCTIONS</b>	<b>PAY OUT OF POCKET</b>
How many W2's do you have ?	Mortgage interest ?	Did you owe the state last year ?
Did you receive Unemployment ?	Real Estate taxes ?	Did you pay the State?
Did you receive any bank interest ?	Vehicle tax ?	Did you pay Alimony ?
Did you receive any Misc.1099 income ?	Did you pay Tithes ?	Did you file taxes last year?
Do you have rental property ?		Did you receive a Federal Refund last year?
Do you receive social security ?		Do you owe the IRS ? If so, How much do you owe?
Did you take money from your 401k ?		Have you received any letters from the IRS?
Do you have self employment income ?		Did you pay or borrow funds for college tuition?
Did you sale any stock ?		How much paid for self?
<b>NOTES</b>		How much paid for child?

Are you a victim of Identity Theft? \_\_\_ Yes \_\_\_ No

<b>CHILD CARE EXPENSES</b>
<b>Do you have Child Care expenses?</b>
<b>Name of Child care Provider?</b>
<b>Address:</b>
<b>Federal ID Number:</b>
<b>Amount:</b>
<b>Misc info.</b>
<b>Are you a Armed Forces Reservist?</b>
<b>Are you part of a business Partnership or Corporation?</b>

**Signature:** \_\_\_\_\_

**\*\*IMPORTANT CLIENT INFORMATION\*\***

Dear Client:

It is our desire at Tactical Tax Service to provide accurate, efficient and dependable tax preparation to our clients. However, a completed tax return does not consist of electronic filing; tax returns are completed prior to electronic filing.

We appreciate the opportunity to serve you and we "Thank You" for your business.

Tactical Tax Service

Client Signature(s): Tax payer: \_\_\_\_\_

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

## ACKNOWLEDGEMENT

Please read the following statements and sign below.

I or we acknowledge that the information submitted to Tactical Tax Service to prepare my or our tax return can be substantiated by receipts, canceled checks and other documentations.  
This information provided is true, accurate and complete to the best of my or our knowledge.

I or we also, understand that in the event of an audit, that I or we are responsible for gathering all necessary information for the audit. I or we also, understand that I or we may request the assistance from Tactical Tax Service in helping to put such information together for the IRS and or any state agency that conducts an audit.

I or we also, understand, that as a taxpayer, I or we are responsible for my or our own tax return and that I or we can't hold Tactical Tax Service or the signed tax preparer harmless for any misrepresentation of information that I or we may have provided to the preparer.

I/we have received and read this statement of the company's private policy and understand that I/we tax return information is kept confidential between Tactical Tax Service and that I/We must submit written authorization to Tactical Tax Service before any copy or fax of my return(s) information will be released to any outside party. (Example: mortgage company, financial institutions, educational institutions, etc.)

**\*PRIVACY ACT:** We reserve the right to use your contact information to email, text, call or mail you with advertisement or promotional materials.

Taxpayer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_