**Optional Response Form**

Please utilize this form to document initial and subsequent communication and responses to questions relating to the tax return. This form is to be utilized, in lieu of emails, to submit confidential responses relating to the tax return (i.e. SSN, Account Numbers). Upload this form to the secure Xchange server.

**Please submit a signed letter of engagement before you upload documents:**

[Click here for current LOE](https://nebula.wsimg.com/4d48cd641b2e884900da528911c7fda2?AccessKeyId=318925829CDA2B37FD94&disposition=0&alloworigin=1).

NEW CLIENT SECTION

Please complete the Intake Questionnaire (FULL) form located at: <http://www.cafenterprisesusa.com/links.html>

PRIOR CLIENT SECTION

If there are changes to your tax return data (insurance, address, filing status, dependents, etc.) you may opt to complete the Intake Questionnaire (FULL), the Transmittal Sheet (Simple) form located at: <http://www.cafenterprisesusa.com/links.html> or provide basic updates below.

Key information needed for your return includes:

* Taxpayer Cellphone #:
* Taxpayer Cellphone Carrier (i.e. AT&T, Sprint):
* *Spouse Cellphone #:*
* *Spouse Cellphone Carrier (i.e. AT&T, Sprint):*
* Did you maintain 12 months of health care coverage?
* If not, please explain:
* Has your address changed?
* New address:

Penalties are assessed if additional taxes are owed and the Service is unable to contact the taxpayer to resolve the issue timely.

**ALL CLIENT SECTION**

Please use the space below to detail on going communication between you and your tax preparer. Follow-up communication on this sheet should include a date/time of the response. When possible, record new responses above older portions of the ongoing chain (older communication should be at the bottom of the page). Please use as many pages as necessary to document your tax situation.

Begin below:>