

New Client Information Sheet

All personal information is considered confidential and treated appropriately.



JOE M. TUCKER
CERTIFIED PUBLIC ACCOUNTANT, P.C.

1-Taxpayer and Spouse Information

	First Name	M.	Last Name	SSN / ITIN	Date of Birth	Occupation
Taxpayer						
Spouse						

2-Contact Information

Address				Cell Phone	
Apartment/ Unit				Home Phone	
City				Work Phone	
State		Zip Code:		Taxpayer e-mail	
				Spouse e-mail	
				Taxpayer AL DL#	
				Spouse AL DL#	

3-Dependent Information

	First Name	M.	Last Name	SSN / ITIN	Date of Birth	Relationship
Dependent						
Dependent						
Dependent						

4-Banking Information

Routing No:	Account No:	Savings	Checking

OFFICE USE ONLY

	S	MFJ	MFS	HOH	QW	NOTES
Filing Status						
Next Steps:	NOTES					
SCh. E, F, or C? FEIN?						
Client Number						
Appointment Set						
Ultra Tax Set-up						
Source Documents						
Staff						