

|              |   |   |
|--------------|---|---|
| <b>Date:</b> | <b><u>Client Intake Tax Form</u></b><br><b>Heintz Tax Service</b> | <b>Tax Year: 2023</b><br><input type="checkbox"/> New Client<br><input type="checkbox"/> Returning Client |
|--------------|---|---|

Thank you for allowing us to prepare your tax return. It is very important for you to provide the information on this form to help our staff in completing your return. If you have any questions, please ask.

**Part 1: Your Information**

| Your Name     | Date of Birth | SSN/ITIN | License info |
|---------------|---------------|----------|--------------|
|               |               |          | License #    |
|               |               |          | Issue Date:  |
|               |               |          | Exp. Date:   |
| Spouse's Name | Date of Birth | SSN/ITIN | License info |
|               |               |          | License #    |
|               |               |          | Issue Date:  |
|               |               |          | Exp. Date:   |
| Best Phone #  |               | Email    |              |
|               |               |          |              |

| Mailing Address | School District/Township |
|-----------------|--------------------------|
|                 |                          |

|  |                  |
|--|------------------|
| Did you Move in 2023? <input type="checkbox"/> Yes <input type="checkbox"/> No | New Address:     |
| Date of Move:  | School District: |

**Filing Status:**  Single  Married  Married filing separate  Head of household  
 Qualifying widow(er) w/ dependent child  **Student Return**

**Part 2: Dependent Information**

Are there any changes to your Dependents?  Yes  No    If Yes, which Dependent:  
Remove Dependent:  Yes  No    Reason for Change:

| Name (first, last) | DOB | Social Security # | Relationship to you | Full-time Student<br>YES/NO | Daycare Expenses<br>YES/NO |
|--------------------|-----|-------------------|---------------------|-----------------------------|----------------------------|
|                    |     |                   |                     |                             |                            |
|                    |     |                   |                     |                             |                            |

**Part 3: Bank Information**  SAME as Previous Year

| Bank Name | 9-Digit Routing # | Bank Account # | Account Type   |
|-----------|-------------------|----------------|--|
|           |                   |                | <input type="checkbox"/> Checking <input type="checkbox"/> Savings |

**Part 4: NOTES**