

CLIENT CHECK LIST

*Name:

*Spouse:

*Address:

*Landline Phone:

*Cell:

*Spouse:

*Email:

*DOB:

*Spouse:

*SSN:

*Spouse SSN:

(Only dependents you are claiming please)

*Dependents:

*DOB/SSN

*RELATIONSHIP

1.

2.

3.

4.

5.

EXAMPLE

Joe Smith

02/01/2010 111-11-1111

Son

***required**

If no spouse, please leave blank this makes it easier for us to read. Thank you!

DRIVER'S LICENSE OR STATE ID INFORMATION

Taxpayer

Spouse

Your Name:		
Number:		
State that issued License :		
Date Issued:		
Expiration Date:		

Due to all the new State regulations, we must have this information to E-file your state and or school return. If we do not have this information, you will be required to paper mail your state and school returns.

This includes any licensed children that are filing a return under 18.

DIRECT DEPOSIT INFORMATION

IF THIS FORM IS NOT FILLED OUT AND SIGNED YOU WILL RECEIVE A PAPER CHECK. IT HAS TO BE IN YOUR FILE EVERY YEAR!! IF YOU ARE USING TWO BANKS, YOU NEED TWO FORMS COMPLETED.

NAME: _____

DIRECT DEPOSIT INFORMATION FOR: **Please mark 1 line below:**

Federal_____

State_____

Both_____

(If you are wanting the Federal or State deposited into a different account you will need to fill out a separate form)

Financial Institution Name: _____

Routing Transit Number: _____

Account Number: _____

Deposit Funds To:

___ Checking

___ Savings

___ Paper Check

I authorize the deposit to the account referenced above or receiving a paper check at my request:

Signature: _____ Date: _____

***Your signature confirms this information to be correct and releases L.A. Bryson from any responsibility due to non-direct deposit of funds. A check will be issued if the direct deposit cannot be made by the tax departments.**

Client Consent To Use Tax Information

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot use, without your consent, your tax return information for purposes other than the preparation and filing of your tax return. In addition to tax preparation services, L.A. Bryson & Co. is in the business of providing year-round financial consultation and tax planning services. These services cannot be provided without your consent.

Consent to Use

I consent to the use of my tax information for purposes other than preparing my tax return. I consent for L.A. Bryson & Co. to communicate with me via newsletter, e-mail, web site, phone, or other means with information and recommendations that may be of use to me, including but not limited to:

Tax Advice: Advisory services relating to events in my life that have tax consequences such as college, investment transactions, marriage, divorce, and retirement.

Tax Planning: Services related to planning and forecasting potential tax obligations and their estimated tax payment requirements.

Asset Advice: Services related to the tax considerations of buying and selling of real estate.

By signing this form, you expressly consent the use of your tax information for the purposes of providing these auxiliary tax and financial services to you. I understand L.A. Bryson & Co. is using tax information furnished by me to provide me with the services listed here.

I also understand that I may terminate this consent at any time by providing written request for termination. Except upon approval by me or as required by law L.A. Bryson & Co. will not disclose my confidential tax information to any other person for any other purpose.

I also acknowledge that I have read and understand L.A. Bryson & Companies Privacy Policy provided within this document.

Duration of this consent: April 15, 2024

Name (print): _____

Spouse's Name: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

If you believe your tax information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484 or by email at complaints@tigta.treas.gov. Something