Hurst, Kelly and Company LLC Form 1040 New Client Basic Information Worksheet (in Lieu of Completed Tax Organizer)

| Taxpayer Infor | mation | | Spouse | Information |
|---------------------------------|------------------|------------------|-----------------------|------------------------|
| Last Name: | | Last Name: | | |
| First Name: | | First Name: | | |
| Middle Initial: | | Middle Initial: | - | |
| Taxpayer DOB: | | Spouse DOB: | | |
| Taxpayer SS#: | | Spouse SS#: | | |
| Occupation: | | Occupation: | | |
| Taxpayer Cell: | | Spouse Cell: | | |
| Taxpayer Email: | | Spouse Email: | | |
| Address: | | | _ Apt Number: | |
| City: | | State: | _ Zip Code: | |
| Directly Deposit Refunds? | es N | 0 | | |
| Account Routing Number: | | Account #: | | |
| Do You Live Within City Limits? | es No | City: | | |
| | Driver's License | /State Issued ID | | |
| <u>Taxpaye</u> | <u>er</u> | | <u>Spouse</u> | |
| Issuing State: | | | | |
| License Number: | | | | |
| Date Issued: | | | | |
| Expiration Date: | _ | | | |
| | Dependent | Information | | |
| First Name Last Name MI SS | <u>D</u> | OB Relationship | Child Care Expense | <u>Tuition Expense</u> |
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