

# Miller's Tax Service LLC, 260-488-2989, Drop-Off Sheet 2022

Drop-Off Date: \_\_\_\_\_ Time: \_\_\_\_\_ Prepared by: \_\_\_\_\_  
New Client: Y/N Electronic Communication Agreement signed? Y/N  
For Office Use Only

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**Client Name:** \_\_\_\_\_ **SS #:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

**Married:** \_\_\_\_\_ **Single:** \_\_\_\_\_ **Can you be Claimed by Someone else:** \_\_\_\_\_

**Spouse Name:** \_\_\_\_\_ **SS #:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Ok to text?** \_\_\_\_\_ (please sign electronic agreement on back)

**Email Address:** \_\_\_\_\_ **Best time to call:** \_\_\_\_\_

**Change in Dependent Status:** \_\_\_\_\_ **If yes please fill out below**

**Driver's License:** \_\_\_\_\_ (need a copy of ID)

**Is your Health Insurance from the Marketplace (Obama Care)?** \_\_\_\_\_ (If yes, need a 1095)

**Own Your Home?** \_\_\_\_\_ **Property Taxes** \_\_\_\_\_

**Rent Your Home?** \_\_\_\_\_ \$\_\_\_\_\_/month **Landlord Name** \_\_\_\_\_

**Landlord Address** \_\_\_\_\_

**Do you pay a private school, or home-school your children?** \_\_\_\_\_ (Indiana Residents Only)

**Did you or one of your children go to college?** \_\_\_\_\_ **College Transcript/Bill:** \_\_\_\_\_ **1098T:** \_\_\_\_\_

**Direct Deposit:** \_\_\_\_\_ **Name of Bank:** \_\_\_\_\_

**Routing Number:** \_\_\_\_\_ **Account Number:** \_\_\_\_\_

**For New Clients or Information Change:**

**Address:** \_\_\_\_\_

**County:** \_\_\_\_\_ **School District:** \_\_\_\_\_

## Children

**Name:** \_\_\_\_\_ **SS #:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_ **Student:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **SS #:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_ **Student:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **SS #:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_ **Student:** \_\_\_\_\_

**Did the children live with you the entire year?** \_\_\_\_\_ **If no, how many months?** \_\_\_\_\_

**Can anyone else claim the children?** **If yes, name** \_\_\_\_\_

**How often?** \_\_\_\_\_

# Miller's Tax Service LLC

## Electronic Communication Agreement

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I do give Miller's Tax Service LLC permission to text me, use email, and other electronic communication when my taxes are completed or when asking for more information. Employees of Miller's Tax Service LLC will do their best to not disclose any information via electronic communication, but I will not hold them responsible, if something is disclosed via things that are beyond their control.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_