

Appt. Date: \_\_\_\_\_

**T & H ACCOUNTING, LLC  
CLIENT INFORMATION SHEET**

**FOR THE TAX YEAR \_\_\_\_\_**

LAST NAME: \_\_\_\_\_

TAXPAYER NAME: \_\_\_\_\_ SPOUSE'S NAME: \_\_\_\_\_

SS#: \_\_\_\_\_ SS#: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

DOB: \_\_\_\_\_ DOB: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

COUNTY: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

# DEPENDENTS: \_\_\_\_\_

NAME	DOB	SS#	RELATIONSHIP

PLEASE TELL US WHERE YOU HEARD OF US \_\_\_\_\_