

TS TAX SOLUTIONS, LLC

Taxpayers Name _____ Spouse Name _____
 Occupation (Job title) _____ Occupation _____
 SSN ____ - ____ - ____ DOB _____ SSN ____ - ____ - ____ DOB _____
 Address _____ Apt# _____
 City, State, Zip _____
 Cell Number _____ Email _____
 Referred by: _____ Prior Year Refund amount: _____

Driver Lic/ID# _____ ID State: _____ Issue Date: _____ Expiration Date: _____
 Driver Lic/ID# _____ ID State: _____ Issue Date: _____ Expiration Date: _____

Filing Status:

Single **(Only you are living there, no dependent live with you)**
 Head of Household **(You are paying all the bills & dependent live with you)**
 Married Filing Joint Married Filing Separate Qualifying Widower

Dependent Name (List youngest First)	Birthdate	SSN	Relation to you Son, Nephew, etc.	Months dependent lived with you (1-12 months) <u>Below</u>	Dependent disabled? <u>Yes or No</u> <u>Below</u>
1.					
2.					
3.					
4.					

Check Your Source of income?

(Job) W2 1099 Contractor Self Employed SSI/SSA Unemployment
 Other

[If you purchased Obama Insurance in 2016; failure to file "FORM 1095-A" will result in the delay of your tax refund]

1. Yes No Do you own a home?
2. Yes No Are you a returning client?
3. Yes No Do you have Healthcare Insurance?
4. Yes No Do you have any Unfiled tax returns?
5. Yes No Have you ever been Audited by the IRS?
6. Yes No Were you already claimed as a Dependent?
7. Yes No Has the IRS ever issued you an Identity Theft Pin Number?
8. Yes No Do you owe the IRS, Delinquent Student Loans, or Back Child Support
9. Yes No Are you looking to purchase a vehicle or know someone that maybe interested?
10. Yes No Are you on government assistance, and or do you plan to purchase a house in the next 2 years?
11. Yes No Do you authorize consent for TS Tax Solutions, LLC to verify you have no back Debt with IRS?
12. Yes No Do you attend college or pay for your child to attend college, and or pay for work certification courses?
13. Yes No Are you interested in Credit Restorations towards home ownership?

How would you like your refund? Direct Deposit Or Check

Bank Name: _____ Bank Routing #: _____ (9 numbers long)

Bank Account #: _____ Checking Savings

Page 1 of 2

Daycare Information

Provider's Name _____

Provider's/EIN _____

Address _____

Total Amount Paid to Daycare \$ _____

List Dependents that Receive childcare Assistance?

College Education Expenses

Did you acquire and educational expenses in 2017? Yes No

Total Cost \$ _____

School Name _____ Address _____

NOTICE: (1) By signing form below, I certify that all information is true, Complete, and accurate. I understand that false information may be grounds for the federal government to seek criminal charges against myself. I also release TS Tax Solutions, LLC from any liability related to the information provided. My signature also authorized TS Tax Solutions, LLC to electronically file my tax year 2017 income tax return. I am aware my refund can take typically between 9 to 21 business days to deposit in my account.

NOTICE: (2) It is important that you present all your income and expense statements i.e. W-2, unemployment, retirement, P&L, etc. Failure to report such documents could result in the delay of your refund and or you will receive a IRS audit notice via mail. IF you have read and understand this notice, please sign and date below.

Tax Payer Signature

Date

Spouse Signature

Date

Tax Preparer Name _____

Page 2 of 2

