## Returning Client Update Information PLEASE INCLUDE WITH TAX DOCUMENTS

DROP OFF only OR [	ate of scheduled appointme	nt:, 2024	
Name:		_ Date:	
Did you move in 2023? YesN	lo If Yes, date moved:		
Current Address:			
Phone Number:	Cell Number:		
E-Mail:			
Did you renew your Driver's Licens	se in 2023? If so, please supp	oly the following	
(both spouses if applicable):			
ID#: Issue date	Expiration Date:	: State:	
Marital Status: Single Married	Divorced Widow(e	r) Separated	
Has the number of dependents cha	anged from last year? Yes	No	
If Yes, explain change:			
Is your bank information the same	last year? (for possible refu	nd) Yes No	
If not, please provide your current OR a cancelled check:	bank name, routing number	and account number	
Bank Name:	Routing #	Account #	
Account Type: Checking Savi			
W2s 1099-Rs 1099-Div 1099-Int 1099 Composite (Investment Statement) Unemployment information (Form 10990 1098 Mortgage Interest 1099-SSA Social Security Statement 1099 Misc or 1099 NEC 1098 Tuition Statement Student Loan Interest Statement	Rentals) Affordable care Act h Child Care Expenses Charitable Contributi Real Estate Taxes (i Statement) Estimated Payments	Income and Expense Totals (Self-Employed or Rentals) Affordable care Act health insurance (Form 1095-A) Child Care Expenses Charitable Contributions Real Estate Taxes (if not on Mortgage Interest	