

PRIME TAX CONSULTING, INC.
 1301 W. MAGNOLIA BLVD.
 BURBANK, CA 91506
 PHONE (818) 842-0392 FAX (818) 842-7237

NAME(S): _____

TAX YEAR: _____

*****IMPORTANT: PLEASE READ & COMPLETE ALL APPLICABLE INFORMATION BELOW***
 SAVE TIME AND MONEY BY COMING WELL PREPARED. BRING THIS FORM FILLED OUT!!!**

THINGS TO BRING:

INCOME/WAGE STATEMENTS, W-2s, 1099s UNEMPLOYMENT & ALL OTHER EVIDENCE OF INCOME & EXPENSES FOR RENTAL ACTIVITY, SELF EMPLOYMENT AS WELL AS INVESTMENT STATEMENTS FOR INTEREST, DIVIDENDS & STOCKS
 CHECK ONLINE AND IN MAIL FOR FORMS SUCH AS 1099-K, 1099-INT, 1099-DIV, 1099-B, ETC.
 FOR NEW CLIENTS ONLY - PLEASE PROVIDE A COPY OF YOUR LAST RETURN FILED

NOTE: WE ACCEPT CASH OR CHECK ONLY

CURRENT ADDRESS: _____

HOME#: _____ WORK#: _____ CELL#: _____

OCCUPATION(S): _____ EMAIL ADDRESS: _____

DIRECT DEPOSIT INFORMATION: _____ BANK NAME: _____

CIRCLE ONE: CHECKING SAVINGS ROUTING#: _____

ACCOUNT#: _____

CONTINUE TO FILL OUT THE BELOW ITEMIZED DEDUCTIONS AS THEY ARE STILL DEDUCTIBLE IN CA & OTHER STATES

HEALTH INSURANCE (CHECK): YES NO IF YES, PROVIDE FORM 1095-A

SALES OF ANY INVESTMENTS INCLUDING STOCK, CRYPTO, DIGITAL ASSETS, ETC (CHECK): YES NO
 IF YES, PLEASE PROVIDE STATEMENTS, FORMS, DOCUMENTATION (I.E. 1099-B, FORM 8949, ETC)

MEDICAL OUT OF POCKET EXPENSES (TOTAL ALL MEDICAL/DENTAL/RX/ETC)..... \$

REAL ESTATE TAX (PROPERTY TAX ON HOME) \$ AUTO REGISTRATION \$

SALES TAX (AUTOMOBILES, MOTORCYCLES, BOATS, ETC)..... \$

INTEREST PAID OUT: NAME OF LENDING COMPANY

FIRST MORTGAGE: \$

2ND MTG (HELOC, ETC) \$

DONATIONS: CHURCH \$ ORGANIZATIONS \$ NON-CASH/IN KIND \$

DEPENDENT CARE EXPENSES (INCLUDE NAME, ADDRESS & TAX ID# OR SSN OF CARETAKER) \$

COLLEGE TUITION PAID OUT OF POCKET (PROVIDE FORM 1098-T FROM SCHOOL ATTENDED)..... \$

UNREIMBURSED MISCELLANEOUS EXPENSES:

Education Exp	\$	Union Dues	\$	Parking Exp	\$
Education Supplies	\$	Tools Exp	\$	Books Exp	\$
Job Seeking Exp	\$	Cell Exp %	\$	Supplies (Work)	\$
Traditional IRA Contrib.	\$	Internet %	\$	Protective Clothing	\$
Roth IRA Contrib.	\$	Misc.	\$	Business Mileage	_____ miles

REMARKS/COMMENTS: _____

FOR BETTER SERVICE BE SURE TO CALL FOR AN APPOINTMENT & PLEASE COME ON TIME. WE ADVISE THAT YOU MAKE NECESSARY ARRANGEMENTS TO BE HERE FOR ABOUT AN HOUR AND A HALF MINIMUM. PLEASE BE SURE TO KEEP ALL YOUR RECORDS AND RECEIPTS TO SUBSTANTIATE ALL DEDUCTIBLE EXPENSES AND REPORTED INCOME FOR AT LEAST 4 YEARS. REFERRALS ARE HIGHLY APPRECIATED AND WELCOMED. THANK YOU!

SEE REVERSE SIDE FOR SPANISH VERSION

YOUR SIGNATURE _____

DATE _____