

NEW CLIENT INFORMATION (INDIVIDUAL)

Taxpayer's Name (include middle initial): _____

Social Security No.: _____

Date of Birth: _____

Spouse's Name (Include middle initial): _____

Social Security No.: _____

Date of Birth: _____

Address: _____

City/State/Zip: _____

Home Phone Number: _____

Entity Name (for reference use only): _____

Entity Type (for reference use only): _____

Taxpayer

Spouse

Work: _____

Work: _____

Cell: _____

Cell: _____

Fax: _____

Fax: _____

Email: _____

Email: _____

How did you find us?

Referred by: _____

Home Owner Letter (year): _____

Other (i.e. Yellow Pages, etc.): _____

****Office Use Only**

Preparer: _____ **Manager:** _____ **Date:** _____

Insert information in the following programs (please check):

_____ **Lacerte** _____ **QuickBooks Ent** _____ **Make Folders**

_____ **New**

_____ **Next Year** _____ **Outlook Contact List** _____ **Addtl New Entity**

_____ **Promo**

_____ **Potential**

Data Entry Completed by: _____ **Date:** _____