



1040 Client Information

Client ID: _____

Name: _____

SSN: _____

Nickname: _____ (if go by name other than legal name)

Date of Birth: _____

Address: _____

Phone Number: _____

Email Address: _____

Occupation: _____

Spouse Name: _____

SSN: _____

Nickname: _____ (if go by name other than legal name)

Date of Birth: _____

Address: _____

Phone Number: _____

Email Address: _____

Occupation: _____

Child Name: _____

SSN: _____

Nickname: _____ (if go by name other than legal name)

Date of Birth: _____

Child Name: _____

SSN: _____

Nickname: _____ (if go by name other than legal name)

Date of Birth: _____

Child Name: _____

SSN: _____

Nickname: _____ (if go by name other than legal name)

Date of Birth: _____

More children? Please request another page.