

**RETURNING CLIENT DROP OFF INFORMATION FORM**

(THIS OPTION IS JUST FOR RETURNING CLIENTS THAT WE FILED THEIR 2024 TAX RETURN)

Today's date \_\_\_\_\_ Time \_\_\_\_\_

Other than the taxpayer, who will be dropping off your personal information:

\_\_\_\_\_

Full name \_\_\_\_\_ Contact number \_\_\_\_\_

Email: \_\_\_\_\_

- Did your filing status (S, MFJ, MFS, QW) change in 2025? YES/NO If so, why did it change? \_\_\_\_\_
- Will the dependent(s) on your 2024 remain the same for 2025 return? YES/NO/NA if you're adding a dependent, please provide the Social Security Number. If you are removing a dependent, please explain why:  
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- Do you have a change in address in 2025? YES/NO  
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- Did you or/and spouse changed employment in 2025? \_\_\_\_\_ did you or your spouse collect unemployment benefits? YES/NO
- How many W2(s) are included in your drop off? \_\_\_\_\_ Are you waiting for additional documents YES/NO?
- Do you have the ACA ("Obamacare" as your medical insurance?) Yes/No
- Did you have "overtime" in 2025? YES/NO
- Did you earn "tips" in 2025? YES/NO
- Did you install energy efficiency in your home? YES/NO
- Did you purchase a "**new**" vehicle in 2025? YES/NO

**Go to our website for more details**

DO YOU HAVE ANY OF THE FOLLOWING: Sole Proprietor, C or S Corporation, LLC. YES/NO

(circle the type of entity) Please provide the Name of the business:

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Signature of the person dropping off: \_\_\_\_\_

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