

PATRICIA A. BECKWITH

CERTIFIED PUBLIC ACCOUNTANT



New Client Information Sheet

Date: _____

Please print your name(s) as they appear on your tax return:

Taxpayer's Name: _____

Spouse's Name: _____

Address: _____

Taxpayer's Info:

Home: _____ Cell: _____ DOB: _____

E-Mail: _____ SS# _____

Spouse's Info:

Cell: _____ DOB: _____

Email: _____ SS# _____

Please circle one:

How did you first hear of my services? **Internet** or **Social Media** or **Referral** or **Other**
Referred by: _____

How do you prefer to receive your Tax Organizer? **SmartVault (electronic)** or **Paper**

Please provide a brief description of what brings you here today:

_____ COPY OF PRIOR YEAR RETURN RECEIVED

Thank you very much for your business!