

Did you have health insurance through the marketplace? YES: No:
(Please include Form 1095-A)

Did you donate \$300 or more to any 501c3 charities in 2021? If so, how much?
(This could include your church, humane societies, community centers, etc.)

Taxpayer's Driver's License:	Number: _____	Issued: _____	Expires: _____	State: _____
Spouse's Driver's License:	Number: _____	Issued: _____	Expires: _____	State: _____

How will you receive your tax return?
mailing fee of \$8

PDF Copy (\$10 discount)	<input type="checkbox"/>
I will pick it up in person	<input type="checkbox"/>
I would like it mailed to me*	<input type="checkbox"/>

Will you be paying:

at pick-up (no fees apply)	<input type="checkbox"/>
via my refund (fees apply)	<input type="checkbox"/>

IF SELF EMPLOYED: How many days were you off due to covid-19?	
Were you employed by anyone else at that time who issued you a W2?	Yes: <input type="checkbox"/> No: <input type="checkbox"/>

Did you receive an Advanced Child Tax Credit in 2021? YES: No:
(MUST include Form 6419 from the IRS)
If not provided, could postpone return processing, per IRS.

Please use the space below to let your preparer know of any changes in 2021 or any additional information necessary to complete your tax return: