



# EMSHWILLER & EMSHWILLER

## CLIENT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Driver's License #: \_\_\_\_\_

State Issued: \_\_\_\_\_

Issue Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

I Prefer to be contacted by:  
\_\_\_\_ Email  
\_\_\_\_ Phone

## Spouse's Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_

Driver's License #: \_\_\_\_\_

State Issued: \_\_\_\_\_

Issue Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

He/she Prefers to be contacted by:  
\_\_\_\_ Email  
\_\_\_\_ Phone

## Dependent Information (Only list if claiming as a dependant)

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_

**Office Use Only:**  
\_\_\_\_ scanned source docs    \_\_\_\_ Drive File    \_\_\_\_ QBS    \_\_\_\_ signed Engltr    \_\_\_\_ Signed 8879

Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

**Please complete the following questions**

1. I/We received a Stimulus Payment 1? Y  N  If so, how much? \$ \_\_\_\_\_
2. I/ We received a Stimulus Payment 2? Y  N  If so, how much? \$ \_\_\_\_\_

3. I/ We filed for unemployment? Y  N  If so, have you received your form (1099-G) yet? Y  N

4. I/We use Virtual Currency (Bitcoin)? Y  N  If so, do you have a buy/sell report?

5. I/We have signature authority over a bank account overseas? Y  N

6. I/We own or rent your home? {circle one} **OWN** **RENT** If renting, please complete the following:

a. Landlords Information:

First & Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

b. How much have you paid in rent for the year? \$ \_\_\_\_\_

c. How many months out of the year have you rented? \_\_\_\_\_

*By signing below, I/we acknowledge I/we have answered the above to the best of my/our knowledge.*

\_\_\_\_\_  
{client signature}