



BUTLER, LAVANCEAU & SOBER, LLC

Certified Public Accountants

New Client Information

10450 Shaker Drive, Suite 112

Columbia, MD 21046

410-997-9299 www.blscpa.com

Taxpayer

Last Name

First Name

SSN

Date of Birth

Day Time No.

Mobile No.

Occupation

Email

Current Address

City

State

Zip

County

Spouse (if any)

Last Name

First Name

SSN

Date of Birth

Day Time No.

Mobile No.

Occupation

Email

Have you moved since filing your last return?

Date of Move

Do you have IRA accounts?

Roth Traditional

Do you have IRA accounts(Spouse)?

Roth Traditional

Filing Status

Married Filing Jointly

Married Filing Separately

Single

Head of Household

Dependents

Legal Name	Date of Birth	SSN	Lived with Taxpayer all year Yor N?

Bank Account for Direct Deposit of Refunds:

Name of Bank

Routing Number

Account Number

Checking or Savings?

How did you hear about us? When are you typically ready for tax prep? How do you prefer contact with our office?

Mos

Day

In Person

Phone

Email