



ULTIMATE TAX LLC

2450 FONDREN RD STE 111
HOUSTON TEXAS 77063

PHONE: 346-324-5960 FAX: 832-582-8299

FIRST NAME: _____ LAST NAME: _____

SSN: _____ D.O.B _____

SPOUSE FIRST NAME: _____ SPOUSE LAST NAME: _____

SPOUSE SSN: _____ SPOUSE D.O.B _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

CELL PHONE: _____ HOME PHONE #: _____

Occupation: _____ YES NO

Did You Receive Insurance Through The Marketplace

FILLING STATUS

- 1. SINGLE
- 2. MARRIED FILLING JOINTLY
- 3. MARRIED FILLING SEPERATELY
- 4. HEAD OF HOUSHOLD
- 5. QUALIFYING WIDOWER

DEPENDENTS INFORMATION

NAME: _____ SSN _____ D.O.B _____ AGE _____ SEX _____

NAME: _____ SSN _____ D.O.B _____ AGE _____ SEX _____

NAME: _____ SSN _____ D.O.B _____ AGE _____ SEX _____

NAME: _____ SSN _____ D.O.B _____ AGE _____ SEX _____

TAXPAYER SIGNATURE: _____ SPOUSE SIGNATURE: _____

BY SIGNING THIS DOCUMENT, YOU CONCUR THAT ALL INFORMATION YOU PROVIDED FOR YOUR TAX PREPARATION IS AUTHENTIC AND NO FRAUDULENT IN ANYWAY. THIS INCLUDE: ID, SOCIAL SECURITY CARD, BIRTH CERTIFICATE, W2 FORM, 1099 FORM, 1098 FORM, SELF EMPLOYEMENT ETC.....