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www.alaskatax.net

Returning Client Information

Taxpayer							
First Name	MI	Last Name					
Home Phone				Work Phone			
Cell Phone				PFD <input type="checkbox"/> Yes <input type="checkbox"/> No			
Email							
Spouse							
First Name	MI	Last Name					
Home Phone				Work Phone			
Cell Phone				PFD <input type="checkbox"/> Yes <input type="checkbox"/> No			
Email							
Address							
Address							
City			State			Zip	
Change in Marital Status? <input type="checkbox"/> Yes <input type="checkbox"/> No							
New Spouse	MI	Last Name	Date of Birth	SSN*	Date Married		
First Name							
*Copy of new spouse's ID required.							
<input type="checkbox"/> Widowed (date)		<input type="checkbox"/> Divorced (date)			<input type="checkbox"/> Separated (date)		
NEW Dependents? <input type="checkbox"/> Yes <input type="checkbox"/> No							
First Name	MI	Last Name	Date of Birth	SSN*	Relationship	Months in Home	PFD?
* Copy of new dependent social security card required.							
Additional Information							
Direct Deposit <input type="checkbox"/> Yes <input type="checkbox"/> No		Bank Name				<input type="checkbox"/> Checking	
Account #			Routing #			<input type="checkbox"/> Savings	
Unemployment received		<input type="checkbox"/> Yes <input type="checkbox"/> No		1099-G needed to file			
Bought / Sold property		<input type="checkbox"/> Yes <input type="checkbox"/> No					
Contribute to IRA		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> ROTH <input type="checkbox"/> Traditional			
Pay tuition fees		<input type="checkbox"/> Yes <input type="checkbox"/> No		Need to see proof of payment			
Pay student loans		<input type="checkbox"/> Yes <input type="checkbox"/> No					