

DAT Financial & Tax Service
12610 Summerfield Lane
Poway, CA 92064
Ph/fax: (858)592-0770; e-mail: info@dattax.com

Client Name: _____

Please provide the following information to complete your tax return:

- | | |
|---|---|
| _____ Alimony received/paid | _____ Mortgage interest |
| _____ Business income/expenses | _____ Motor vehicle registration fees |
| _____ Casualty loss | _____ Moving expense |
| _____ Charitable contributions | _____ Pension/retirement income |
| _____ Child care expense/provider info | _____ Real estate taxes |
| _____ Dividend income | _____ Rental income/expenses |
| _____ Educator expenses | _____ Social Security income |
| _____ Energy improvements | _____ Social security number |
| _____ Escrow final closing statement | _____ State income taxes paid |
| _____ Estimated tax paid | _____ State income tax refund |
| _____ Foreclosure/short sale info | _____ Stock/mutual fund purchase/sale price |
| _____ Foreign account information | _____ Student loan interest |
| _____ Gambling winnings/losses | _____ Tuition/scholarship |
| _____ Gift information | _____ Unemployment compensation |
| _____ Home office expenses | _____ Vehicle purchase receipt |
| _____ Household employee info | _____ W-2 |
| _____ HSA account information | _____ Other (see below) |
| _____ Interest income | _____ |
| _____ IRA contribution/withdrawal | _____ |
| _____ K-1 schedules | _____ |
| _____ Last year's tax returns (new clients) | _____ |
| _____ Medical expenses | _____ |