



2022 Client Information Form

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| <p>FILING STATUS:</p> <p><input type="checkbox"/> MFJ -Married</p> <p><input type="checkbox"/> MFS -Married</p> <p><input type="checkbox"/> Single</p> <p><input type="checkbox"/> HOH</p> <p><input type="checkbox"/> Widow</p> | <p style="text-align: center;">TAXPAYER:</p> <p>Full Name _____</p> <p>Social Security Number _____</p> <p>Date of Birth _____</p> <p>Occupation _____</p> <p>Phone _____</p> <p>Email _____</p> | <p style="text-align: center;">SPOUSE:</p> <p>Full Name _____</p> <p>Social Security Number _____</p> <p>Date of Birth _____</p> <p>Occupation _____</p> <p>Phone _____</p> <p>Email _____</p> |
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| <p>NEW CLIENTS:</p> <p>Can you provide a copy of your last tax return?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">If this is unattainable, please notify our staff.</p> | <p style="text-align: center;">MAILING ADDRESS:</p> <p>Street: _____ City _____ State _____ Zip _____</p> <p style="text-align: center;">PHYSICAL ADDRESS:</p> <p>Street: _____ City _____ State _____ Zip _____</p> <p>Did you or your spouse purchase health insurance through the Marketplace in 2022? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>*If yes, please provide Form 1095-A</p> |
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| DEPENDENT INFO: | | | | | |
|-----------------|-------|-------------------|--------------|--|--|
| Full Name | DOB | Social Security # | Relationship | College Student? | Child Care? |
| _____ | _____ | _____ | _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____ | _____ | _____ | _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____ | _____ | _____ | _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

ESTIMATED TAX PAYMENTS

Did you make any estimated payments?

Yes No

If so, please list the dates and amounts below.

Quarter 1: Date _____ \$ _____

Quarter 2: Date _____ \$ _____

Quarter 3: Date _____ \$ _____

Quarter 4: Date _____ \$ _____

BANK INFORMATION

Would you like to receive your refund via direct deposit? Yes No

Would you like to pay your tax electronically? Yes No

If either answer is YES, please provide your bank account information below:

Bank _____ Checking Savings

Routing # _____

Account # _____



2022 Client Information Form BUSINESS

BUSINESS ACCOUNT INFORMATION (SKIP THIS SECTION IF NOT APPLICABLE)

Business Name: _____ FEIN: _____

Type of Entity: Sole Proprietorship Partnership S- Corp C-Corp Trust Estate

Franchise Tax Report? Yes No If yes, please provide, Taxpayer # _____ XT # _____

Have you brought all 1099's issued to your business? Yes No

Partnerships/Scorps: Have you made any changes to the minutes or ownership percentages for **2022**? Yes No

IF YOUR BUSINESS NEEDS OUR ASSISTANCE IN PREPARING FORMS 1099 or W2, PLEASE LET US KNOW.

IMPORTANT INFORMATION:

MAKE SURE YOU PROVIDE ALL THE IMPORTANT TAX DOCUMENTS (W2s, 1099s, etc.) THAT YOU'VE RECEIVED.

DO NOT SUBMIT RECEIPTS. INSTEAD, PROVIDE A SUMMARY OF YOUR INCOME AND EXPENSES. THE SUMMARY CAN BE HANDWRITTEN OR PRINTED FROM EXCEL OR YOUR ACCOUNTING SOFTWARE. IF A TAX PREPARER REQUIRES ADDITIONAL DETAILS, THEY WILL REQUEST THEM.

RETURNS WITH NO SUMMARY AND INCOMPLETE DATA WILL INCUR ADDITIONAL PREPARATION FEES.

CLO CPA - VICTORIA

3402 John Stockbauer Drive
Victoria, TX 77901

Phone: 361-578-7333 Fax 361-578-4246



CLO CPA - EDNA

P O Box 804/2510 E. Division St
Edna, TX 77957

Phone: 361-782-3529 Fax 361-782-6465

Dear Taxpayer,

This letter is to confirm and specify the terms of our engagement with you for the year end 2022 and to clarify the nature and extent of the tax services we will provide.

We will prepare the federal and state individual income tax returns for calendar year 2022. We are under no duty to review the information you provide to determine whether you may have a filing obligation with another state. If we become aware of any other filing requirement, we will tell you the obligation and may prepare the appropriate returns at your request as a separate engagement.

It is your responsibility to provide all the information and disclosures required for the preparation of complete and accurate returns. You should retain all the documents, canceled checks, and other data that form the basis of income and deductions. These may be necessary to improve the accuracy and completeness of the returns to a taxing authority. In the event of a tax examination, we will be available, upon request, to represent you. However, such additional services are not included in the fees for the preparation of the tax return(s). You have the final responsibility for the income tax returns and, therefore, you should review them carefully before you sign them.

You should also know that IRS audit procedures will almost always include questions on bartering transactions and on deductions that require strict documentation such as travel and entertainment expenses and expenses for business usage of autos and computers. In preparing your returns, we rely on your representations that we have been informed of all bartering transactions and that you understand and have compiled with the documentation requirements for your expenses and deductions. If you have questions about these issues, please contact us.

We will discuss tax positions that may increase the risk of exposure to penalties and any recommended disclosures with you before completing the preparation of the return. If we conclude that we are obligated to disclose a position and you refuse to permit the disclosure, we reserve the right to withdraw from the engagement and you agree to compensate us for our services to the date of withdrawal. Our engagement with you will terminate upon our withdrawal.

The IRS permits you to authorize us to discuss, on a limited basis, aspects of your return for one year after the return's due date. Your consent to such a discussion is evidenced by checking a box on the return. Unless you tell us otherwise, we will check that box authorizing the IRS to discuss your return with us.

We have the right to withdraw from this engagement, at our discretion, if you don't provide us with requested information in a timely manner, refuse to cooperate with our reasonable requests or misrepresent any facts. Our withdrawal will release us from any obligation to complete your return and will constitute completion of our engagement. You agree to compensate us for our time and out-of-pocket expenses through the date of our withdrawal.

If the foregoing correctly sets forth your understanding of our tax agreement, please sign this letter in the space below. If you disagree with any of these terms, please notify us immediately.

We want to express our appreciation for this opportunity to work with you.

Very truly yours,
Catherine L Ozment, CPA

AGREED TO AND ACCEPTED

Signature: _____

Date: _____

Printed Name: _____