Caton Business Services, LLC

Phillip Caton, M.B.A.

INTAKE SHEET FOR TAX PREPARATION

Your First Name	MI	Last Name	SS #
Spouse's First Name	MI	Last Name	SS #
Mailing Address Apt #	City	State	Zip
Phone: Primary	Phone: Other	Email	
Your Date of Birth	Your Occupation	Are you legally blind:	Are you totally & permanently disabled:
Your Spouse's Date of Birth	Spouse's Occupation	Is Spouse Legally Blind:	Is your spouse totally & permanently Disabled:

Can your parents or someone else claim you or your spouse on their tax return? ____

As of December 31, 2015 your marital status was:

Single _____

Married: _____ Divorced or legally Separated: _____ Widowed: _



Family and Dependent Information:

Name	Date	Relationship	# of	U S Citizen	SS #	Full time	Received
	of		months	Resident of		Student	More than
	Birth		lived	U S Canada			\$6100 in
			with you	Mexico		Yes/No	Income
							Yes/No
		1	1	1			

Signature:

Date: _____

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