29 PALMS COMBAT CENTER TAX OFFICE INTAKE SHEET

FOR OFFICE USE ONLY

Walk-in: _____ Appointment: _____

Today's date: _____

Time handed to tax clerk: _____

Time handed to tax preparer: _____

Appointment time: _____

TAX PAYER: _____ _____ _____ _____ _____

LAST *FIRST* *M.I.* *SUFFIX* *SSN*

SPOUSE: _____ _____ _____ _____ _____

LAST *FIRST* *M.I.* *SUFFIX* *SSN*

YOUR/SPONSORS RANK:_____ **UNIT:**_____ **BRANCH OR SEVICE:**_____

DUTY STATUS: ☐ *ACTIVE* ☐ *RESERVES* ☐ *RETIRED* ☐ *DEPENDENT*

		CIRCLE ONE	
1.	Do you **OWN RENTAL PROPERTY?**(Documents/Receipts)	YES	NO
2.	Do you have **MUTUAL FUNDS/STOCKS?** (Form 1099T's)	YES	NO
3.	Are you **SELF-EMPLOYED?**(1099MISC's)	YES	NO
4.	Do you **OWN A HOME?** (Form 1098's)	YES	NO
5.	Are you **ITEMIZING DEDUCTIONS?**(Statements/Receipts)	YES	NO
6.	Did you purchase your **FIRST HOME** between **4-8-2008** and **5-1-2010?** **(Or before 10-1-2010 with a binding contract.)**(Documents/Receipts)	YES	NO
7.	Did you **RENT** a house or apartment in California in 2010**?**(Rent Receipts)	YES	NO
8.	Are you **PAYING** student loans**?** (Form 1098T's)	YES	NO

- **If you answered YES to any of numbers 1-8, STOP and speak to the TAX CLERK.**
- **If you are filing jointly and your spouse is NOT present, will you be using a power of attorney? (*If yes, we will need to see the original power of attorney*.)**

DIRECT DEPOSIT: **If a direct deposit of your refund is requested, please provide the following information along with proof of your account:**

- **Blank check**
- **LES listing account information**
- **MyPay printout**
- **Last year's tax return with bank information**

FOR OFFICE USE ONLY	RETURNS BEING FILED	
	FEDERAL	STATE
Tax Preparers Rank and Last Name:		