RIEDIGER ACCOUNTANCY, P.A.

Certified Public Accounting and Tax Preparation

2017 Client Information Form SIDE 1 OF 2 **SECTION 1 – CONTACT INFORMATION Daytime Phone Mobile Phone** Name Taxpayer Spouse **Business Name Phone Fax** Provide your business name if a sole proprietor or LLC **Email Addresses** An email address enables us to provide confirmation for e-filed tax returns, email invoices and monthly statements, and better communicate with you on your accounting and tax matters. As tax materials contain personal and confidential information, list only private email addresses. Indicate delivery preferences for tax returns, invoices, and statements in section 4, on reverse. Taxpayer Spouse Address Provide your current official or primary address. Address City State Zip **Mailing Address** Provide your current mailing address, if different. Address City State Zip **Communication Preferences**

Continued on reverse ⇒

SPOUSE

Primary Contact

TAXPAYER

Please indicate your preferences by circling your selection for each item below.

BOTH

Preferred Contact Method

DAYTIME PHONE

BUSINESS PHONE

EMAIL

MOBILE PHONE

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SIDE 2 OF 2

SECTION 2 – IDENTITY AUTHENTICATION							
In order to combat and prevent identity theft, the Internal Revenue Service, in partnership with state tax authorities, implemented various checks to verify and confirm taxpayer identity for electronically filed income tax returns. States began verifying taxpayer identity using driver's license or state identification information last year. This information is required to complete and electronically file your tax returns.							
Provide current driver's license or state identification card information for taxpayer and spouse, as indicated below. For Type , enter DL , for driver's license, or ID ; for identification card.							
Name on Driver's License / I	D	Туре	Driver's License	/ ID Number	State	Issued	Expires
Taxpayer							
Spouse							
SECTION 2 FLEC	TRONIC	TAVE	FELINDS AN	D DAVM	ENTE	l	
SECTION 3 – ELECTRONIC TAX REFUNDS AND PAYMENTS							
Tax Refund Direct Deposit Specify your electronic tax refund preferences below. Direct deposit refunds are generally processed faster.							
☐ No, process tax refunds by mailed check.							
☐ Yes, direct deposit FEDERAL tax refund.							
☐ Yes, direct deposit MN tax refund.							
☐ Yes, direct deposit all other state tax refunds.							
Tax Payment Electronic Funds Withdrawal (EFW)							
Specify your electronic tax payment preferences below. We will contact you to confirm payment amount(s) and dates(s) <u>before</u> processing.							
☐ No, I will pay all taxes due.							
☐ Yes, EFW for <u>FEDERAL</u> income tax due.							
☐ Yes, EFW for <u>FEDERAL estimated tax</u> payments for: ☐ 1 st ☐ 2 nd ☐ 3 rd ☐ 4 th quarter 2018.							
☐ Yes, EFW for MN income tax due.							
☐ Yes, EFW for <u>all other state income taxes</u> due.							
Bank Account Information							
Provide bank account details if you answered YES for any direct deposit or electronic funds withdrawals (EFW) above.							
For Type, enter CHECKING or SAVINGS; for Joint?, enter YES, if joint account, otherwise NO. Note: Bank account holder name must match taxpayer name reported on Form 1040. We will provide you with a form to verify and authorize these transactions prior to processing or filing your income tax returns.							
Bank Name	Туре	Routing		Joint?	Account		
SECTION 4 – DELIVERY PREFERENCES							
Specify your delivery preferences for each item below.							
Tax Return	Invoices / Statements			Tax Organizer	Tax Organizer		
PICKUP EMAIL	MAIL*		EMAIL MAIL		MAIL	EMAIL	ONLINE