

JOSEPH A. MIRANDA LLC

300 CHURCH STREET, SUITE 303 YALESVILLE, CONNECTICUT 06492-2253

Personal Information Worksheet

Taxpayer

Spouse [if married]

First Name & M/I

Last Name

Home Address

_____ Apt _____

City, State, Zip Code

_____ -

Home Phone

- -

Business Phone

- -

Cell Phone

- -

Personal E-mail Address

Personal E-mail Address

Social Security Number

- -

Date of Birth

/ /

Date of Death

/ /

Occupation

Blind

Yes No

Yes No

Dependent of Another

Yes No

Yes No

Presidential Election Fund

Yes No

Yes No

Do you authorize the IRS and state tax department to discuss your return with this tax preparer if necessary?

Yes No

Dependents

X if full-time student

X

Name/Relationship

SSN / Date of Birth

- / /

Name / Relationship

SSN / Date of Birth

- / /

Name / Relationship

SSN / Date of Birth

- / /

Name / Relationship

SSN / Date of Birth

- / /