

Tax Drop Off Service Worksheet/Checklist

Are there any changes such as the ff:

- Your Name _____
- Your Filing Status _____
- Your Job Title _____
- Your Address _____
- Your Bank Account Information _____
- Additional Dependents _____
- Removing any Dependents _____

Have you done something in the past year that you think may affect your tax filing, such as the ff:

- Been Unemployed _____
- In search of a job _____
- Did Volunteer Work _____
- Started your own business _____
- Work Related Traveling _____
- Health Issues _____
- Attended Seminars related to your work _____
- Went back to school _____
- Dropped out of school _____

List or Specify any changes that we did not mention above, or write notes in relation to your taxes.

Don't forget to list down all your contact telephone numbers and email address, in that way when we encounter anything we may contact you.