

# Personal Information Worksheet

Taxpayer

Spouse

Name	_____	_____
Nickname	_____	_____
Street Address	_____	_____
City, State & Zip Code	_____	_____
Social Security Number	_____	_____
Date of Birth	_____	_____
Occupation	_____	_____
Home Telephone	_____	_____
Work Telephone	_____	_____
Cell Phone	_____	_____
Fax Number	_____	_____
E-mail Address	_____	_____

## Dependent Information

<u>Name</u>	<u>Date of Birth</u>	<u>Social Security Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____