

Date: \_\_\_\_\_

**Type of Filing**

7-10 Business Days: \_\_\_\_\_ Regular You Mail: \_\_\_\_\_ Regular Electronic: \_\_\_\_\_

**Payment for tax preparations:**

Check \_\_\_\_\_ Credit Card \_\_\_\_\_ Take out of refund if any: \_\_\_\_\_ If chosen answer one question below

- 1. Mothers Maiden Name
- 2. First Pets name
- 3. What high school did you attend?
- 4.) Name of oldest Child
- 5.) What is your fathers Middle Name

**Answer** \_\_\_\_\_

**Filing Status**

Married: \_\_\_\_\_ Single: \_\_\_\_\_ Head of household: \_\_\_\_\_

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

SS#: \_\_\_\_\_ SS#: \_\_\_\_\_

DOB: \_\_\_\_\_ DOB: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Has your name changed? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, name before: \_\_\_\_\_

**Dependents:**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Relationship: \_\_\_\_\_ Months at home: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Relationship: \_\_\_\_\_ Months at home: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_

Relationship: \_\_\_\_\_ Months at home: \_\_\_\_\_

Would you like us to quote you on insurance? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Who is your current insurance provider? \_\_\_\_\_



## **2022 Tax Refund Direct Deposit Authorization Form**

I, \_\_\_\_\_, here by authorize Bell Mutual Financial Services to setup my federal &/or state tax refund(s) for direct deposit in the bank account listed below:

Client Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Street Address: \_\_\_\_\_

Acct Type: \_\_\_\_\_

Routing #: \_\_\_\_\_

Acct #: \_\_\_\_\_

Please attach a blank copy of a check or voided check.

Thank you.

By signing and dating this document you are authorizing Bell Mutual Financial Services to make deposits into your account.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## 2022 PERSONAL TAX SERVICES ENGAGEMENT LETTER

This letter is to confirm our understanding of the terms and objective of our tax services engagement and to clarify the nature and limitation of the tax services to be provided.

We will prepare your returns from information which you furnish to us. You represent that the information you are supplying to us is accurate and complete to the best of your knowledge. We will not verify the information you give us; however, we may ask for additional clarification of some information. You have the final responsibility for the income tax returns and therefore, you should review them carefully before you sign the returns or the e-file transmittals.

As you know, your returns are subject to examination by the taxing authorities. In the event of an audit, you may be requested to produce documents, records, or other evidence to substantiate the items of income and deductions shown on your tax returns. The law provides a penalty to be imposed upon the taxpayer where there is a substantial understatement of tax liability. If you would like information on the amount or circumstances of the penalty, please let us know.

We will use our judgment in resolving questions where the tax law is unclear, or where there may be conflicts between the taxing authorities' interpretations of the law and other supportable positions. Unless otherwise instructed by you, we will resolve such questions in your favor whenever possible. If during our work, we discover information that affects our prior year tax returns, we will make you aware of the facts. However, we cannot be responsible for identifying all items that may affect prior year returns. If you become aware of such information during the year, please contact us to discuss the best resolution of the issue.

All invoices are due and payable upon receipt. Tax returns will not be filed or released to you until our fees for the return have been paid.

Please indicate your acceptance of the above understanding by signing below.

Accepted by \_\_\_\_\_

Date: \_\_\_\_\_