

# Organizer

Tax Year \_\_\_\_\_

## Spouse

*Failure to provide ALL requested can cause delays and/or increased fees in your tax preparation.*

SPOUSE NAME <i>(AS IT APPEARS ON SOCIAL SECURITY CARD)</i>	LAST:
	FIRST:
	MIDDLE:
	SOCIAL SECURITY#:
BIRTHDATE:     /     /	PROFESSION/OCCUPATION:
SPOUSE CONTACT INFORMATION	PRIMARY #:
	OTHER #:
	EMAIL:

☐ You MUST provide readable copy of your state issued picture ID/Driver License - front & back

Do you want \$3 to go to the Presidential Election Campaign (will not change your tax or refund) ☐ NO   YES ☐