

# 2024 TAX YEAR

## THE LINDLEY'S TAX SERVICE

### TAXPAYER INFORMATION:

\_\_\_\_\_  
LAST NAME FIRST NAME MI SUFFIX (JR., SR., etc.)

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

WORK: \_\_\_\_\_ EXT. \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

ALTERNATE PHONE OR CELL PHONE: \_\_\_\_\_

BEST # TO REACH YOU: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

☐ Please check if your address has changed from 2023 (address still must be completed)

ADDRESS: \_\_\_\_\_ APT. # \_\_\_\_\_  
STREET/P.O. BOX  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

### SPOUSE INFORMATION:

\_\_\_\_\_  
LAST NAME FIRST NAME MI SUFFIX (JR., SR., etc.)

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

DOB: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

WORK: \_\_\_\_\_ EXT. \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

BEST # TO REACH YOU: Work \_\_\_\_\_ Cell \_\_\_\_\_

Driver's License # \_\_\_\_\_

Issue Date \_\_\_\_\_

Expiration Date \_\_\_\_\_

**DEPENDENT INFORMATION**

NAME LAST, FIRST, MI	SOCIAL SECURITY NUMBER	DATE OF BIRTH	RELATION- SHIP	CHILD CARE YES/NO	MONTHS IN HOME	EDUCATION CREDIT YES or NO
					12	
					12	
					12	
					12	

**CHILD CARE INFORMATION**

CARE PROVIDER (Name & Phone Number)	ADDRESS	EIN # or SS #	AMOUNT PAID

*Are you and/or any dependents being claimed on anyone else's tax return?*  
*No* \_\_\_\_ *If yes, by whom?* \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**THESE RATES ARE IN ADDITION TO TAX PREPARATION FEES.  
 REFUNDS PENDING IRS APPROVAL ONCE SUBMITTED.**

Fast Cash Advance	(24-72 HRS)	\$375.00
Refund Transfer	(10 – 14 DAYS)	\$275.00
Electronic Filing	(3 weeks)	\$150.00
Mail Out	(packet will be mailed to you for you to sign and mail)	\$25.00
Mail Out	(come into the office to mail)	FREE

I declare that all information on this form to the best of my knowledge and belief is true, correct, and complete. By signing this information sheet, I authorize THE Lindley's **Tax Service Company** to prepare Income Tax Return(s) on my behalf and to verify with the IRS on prior outstanding debts owed to the IRS, Student Loans or Child Support.

X \_\_\_\_\_ X \_\_\_\_\_  
**Taxpayer's Signature** **Date** **Spouse's Signature** **Date**

***THE LINDLEY'S TAX SERVICE COMPANY***

***THANK YOU FOR YOUR CONTINUED SUPPORT***