

BASIC INFORMATION									
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Name	Phone 1	
Address	Phone 2	
	Phone 3	

Email

	Social security number	Occupation	Date of birth	Designate \$3 to the Presidential election fund	Blind Yes No
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TAXPAYER				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>
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SPOUSE					Yes	No			
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Filing Status: ☐ Single ☐ Married filing joint ☐ Married filing separate ☐ Head of Household ☐ Qualifying widow(er) with dependent child

If you can be claimed on your parent's or someone else's return, check here ☐

EXEMPTION INFORMATION	
<p> <input type="checkbox"/> </p>	<p> <input type="checkbox"/> </p>

[illegible]

If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here ☐

W-2 INFORMATION Please enclose copies of ALL W-2 forms

[illegible]

If your employer didn't reimburse you or over reimbursed you for any expense as an employee, check here ☐

If you had employer paid child care benefits, check here ☐