

NAME: \_\_\_\_\_

LAST 4 OF SS# \_\_\_\_\_

WHERE WERE YOUR TAXES PREPARED IN 2019: \_\_\_\_\_  
IF NOT DONE IN 2019, WHERE IN 2018: \_\_\_\_\_

WOULD YOU LIKE US TO EMAIL YOUR TAX RETURN TO YOU FOR YOU TO PRINT YOURSELF AT YOUR HOME? YES NO

ARE YOU A CITY RESIDENT: Y N  
ARE YOU A NON-RESIDENT WORKING IN THE CITY Y N

<b>IF A REFUND FOR DIRECT DEPOSIT</b>	
NAME OF BANK OR CU	_____
ROUTING #	_____
ACCOUNT #	_____

Are you a renter or homeowner? Circle one.

If you are a homeowner bring you property tax bills for what was **Billed** to you for the year 2020, regardless if you paid them or not.

<b>RENTER INFORMATION</b>	
Renting House: Y N Apartment: Y N	
Name of Apt.	_____
Monthly Rate	\$ _____
Number of Months	_____
Monthly Rate	\$ _____
Number of Months	_____
Was your rent subsidized? YES NO	
Landlord's name:	_____
Landlord's address:	_____

<b>HOME HEATING CREDIT:</b>	
Is your utility bill in your name? YES NO	
Amount paid from utility bill	\$ _____
If renting, is heat included in rent? YES NO	

Did you receive the stimulus payments? YES NO	
1st payment amount	\$ _____
2nd payment amount	\$ _____

DID YOU HAVE CASH CHARITABLE CONTRIBUTIONS: YES NO	
AMT \$	_____

<b>INFORMATION NEEDED FOR MICHIGAN HOUSEHOLD RESOURCES</b>	
If you or your spouse or other family member received SSI in 2020 you need to bring the statement from the Social Security Administration showing the amount you received.	Taxpayer Amt: \$ _____ Spouse Amt: \$ _____ Minor child Amt: \$ _____
Did you receive the \$42 per quarter from Michigan? YES NO	
Did you receive Child Support in 2020? How much per month: \$ _____ How many months: _____	Did you receive any cash gifts to help pay expenses: YES NO How much: \$ _____
Did you receive VA benefits in 2020? How much per month: \$ _____ How many months: _____ % Disability _____	Medical Insurance Premiums Auto Insurance # of Cars X \$130 \$ _____ After Tax Medical Insurance premiums: \$ _____