|  |
| --- |
| **Full name** |  |
| Address, City, State & Zip code |  |
| **DID Mica FILE YOUR TAXES LAST YEAR?** |  |
| Your Phone Number |  |
| Birthday (MM/DD/YYYY) |  |
| Social Security number |  |
| **Driver’s License # and exp date** |  |
| E-mail address  |  |
| Wife’s name (if applicable) |  |
| Birthday (MM/DD/YYYY) |  |
| Social Security number |  |
| **Driver’s License # and exp date** |  |
| **Did you have Marketplace Insurance in 2016?** |  |
| **Direct Deposit Information** |  |
| **Routing number** |  |
| **Account number** |  |
|  |
| Dependents Information |
| **1st Dependent name** |  |
| Birthday (MM/DD/YYYY) |  |
| Social Security number |  |
| Relationship (ex: son, daughter) |  |
| **2nd Dependent name** |  |
| Birthday (MM/DD/YYYY) |  |
| Social Security number |  |
| Relationship (ex: son, daughter) |  |
| **3rd Dependent name** |  |
| Birthday (MM/DD/YYYY) |  |
| Social Security number |
| Relationship (ex: son, daughter) |  |
|  |  |
| **Did you or your dependent attend college in 2016?**  |  |
| **Yes OR No (If yes, please attach 1098-T)**  |  |
| Name of School |  |
|  |  |
| **Do you owe the IRS, State Taxes or any other government agency?** |  |
|  |  |