## E-File Questionnaire 2018

All information that pertains to your tax return  $\underline{MUST}$  be filled in.

## Please print clearly

\*\*Be sure to keep a copy of your tax return. Additional requests for a copy after April 15 of this tax year will be charged \$50.00.

New IRS regulations beginning disclose any personal information mail without a written release	tion to anyone an	d for your protection	on we will not	t release any infor			
Do you have any foreign b	ank accounts?	Yes	No				
Does the paperwork turned	l in for income	tax preparation in	clude all inc	ome and expens	es?	Yes N	lo
Have you been denied Ear	ned Income Tax	Credit by the IR	S in the last	3 years?	Yes I	No	
Did you have insurance on	each person in	your family for 2	017?	Yes No			
	411.0	Taxpay					
	All information	n must be identical Taxpayer	to Social Secu	urity Records.  Spouse			
Name							
SS#							
Occupation							
Date of Birth							
In Case your return is rejected, and we have questions <b>Phone Numbers</b>	Cell			Cell			
				<b>11</b>			
Vour filing status – Singl	<b>Home</b> le, Married filing Jointly, Married filing Sepa			Home  prately, Head of Household (Circle One)			
5 2		Depende	ents	·		`	,
Name (First & La	_	n must be identical SS#	to Social Secu	rity Records. <b>Date of Bi</b>		Se	
Traine (1 HSt to 12a		BBII		Dute of Bil			21
E-Mail Addro	ess:			(p	orint c	learly	•)
		Other Infor	mation				
Direct Deposit:	Yes	No Circ	le one				
Bank Name:							
Routing Number:							

Account Number:

Tax Year: 2018

Because of the new requirements by the Internal Revenue Service, I understand that I must have receipts for all deductions claimed on my tax return in case of an audit. I also understand that I must have receipts to go with cancelled checks.

By signing this statement, I understand that I am responsible for all figures given to my tax preparer and he is waived of any liability from the figures that I have given him.

have given him.	arei and he is warved	or any national from the figure	75 trat
I have provided proo	f of all dependents tha	at I am claiming Earned Incom	e
I had insurance on m	e and my family for _	months in 2018.	
Signed:		Date:	
Your Current Address	that you want on Tax F	eturn	
Address			
City	State	Zip	

## Form **8879**

## IRS e-file Signature Authorization

OMB No. 1545-0074

2018

Department of the Treasury Internal Revenue Service ► Return completed Form 8879 to your ERO. (Don't send to the IRS.)
► Go to www.irs.gov/Form8879 for the latest information.

Submission described for SIT So all situation of the Situ

Spouse's name Spouse's social security number Part I Tax Return Information — Tax Ye Adjusted gross income (Form 1040, line 7; Fo 1 2 Total tax (Form 1040, line 15; Form 1040NR, line 61) 2 3 Federal income tax withheld from Forms W-2 and 1099 (Form 1040, line 16; Form 1040NR, line 62a). 3 4 Refund (Form 1040, line 20a; Form 1040-SS, Part I, line 13a; Form 1040NR, line 73a) . . . . . Amount you owe (Form 1040, line 22; Form 1040NR, line 75) . . . . . . . . . . . . . . 5 5 Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return) Part II Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2018, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent. Taxpayer's PIN: check one box only X lauthorize Cranford Enterprises to enter or generate my PIN **ERO firm name** Enter five digits, but don't enter all zeros as my signature on my tax year 2018 electronically filed income tax return. I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Your signature \* Date ▶ Spouse's PIN: check one box only X I authorize Cranford Enterprises to enter or generate my PIN **ERO firm name** Enter five digits, but don't enter all zeros as my signature on my tax year 2018 electronically filed income tax return. I will enter my PIN as my signature on my tax year 2018 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below. Spouse's signature Date ▶ Practitioner PIN Method Returns Only—continue below Part III Certification and Authentication — Practitioner PIN Method Only ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. Don't enter all zeros I certify that the above numeric entry is my PIN, which is my signature for the tax year 2018 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Pub. 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns. ERO's signature ►\_ Date ▶ ERO Must Retain This Form — See Instructions Don't Submit This Form to the IRS Unless Requested To Do So