



SANZ VIRTUAL ENTERPRISE, LLC
ACCOUNTING AND TAXES
CPA SERVICES

Taxpayer Interview Worksheet

Taxpayer Names:

	First and Last Names	Date of Birth	Email	Phone number
Taxpayer				
Spouse				

Address: _____

Select applicable Filing Status:

Single
 Married Filing Jointly
 Head of Household
 Qualifying Widow(er)
 Married Filing Separately

Number of Dependents to be claimed on tax return _____

Dependents info:

Name	Date of Birth	Relationship

Income & Earnings info:

W-2s	Earnings Amount	Taxes Withheld	1099s	Earnings Amount	Taxes Withheld
W-2 #1			1099 #1		
W-2 #2			1099 #2		
W-2 #3			1099 #3		

Deductions & Credits:

Expense	Amount	Expense	Amount
Mortgage interest		Cash donations	
Property taxes		Non-cash donations	
Ad-valorem taxes		Medical expenses	
State taxes paid		Child care expenses	
Educational expenses		Dependent care exp	

Medical miles driven: _____ Charitable activity miles driven: _____

How did you hear about us? _____