



GRANITE POINT TAX GROUP, LLC

www.GranitePointTax.com
OBTP#15341

Client Profile Sheet

Date: _____

Referred by: _____

Taxpayer (first position on tax return)

Spouse (second position on tax return)

Name: _____

Name: _____

Address: _____

Address: _____

(if different)

City/State/Zip: _____

City/State/Zip: _____

SSN: _____ D.O.B. _____

SSN: _____ D.O.B. _____

Phn 1: _____ Phn 2: _____

Phn 1: _____ Phn 2: _____

E-mail 1: _____

E-mail 1: _____

E-Mail 2: _____

E-Mail 2: _____

Occupation: _____

Occupation: _____

Dependents

Name	D.O.B.	SSN	Relationship	Lived Where? (home, school, etc)
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1 _____

2 _____

3 _____

4 _____

Office Use Only	Office Use Only	Office Use Only
<input type="checkbox"/> Est Tax Pmnts	<input type="checkbox"/> City/County	<input type="checkbox"/> 1099s
<input type="checkbox"/> IRA/Roth	<input type="checkbox"/> Tri-Met/LTD	<input type="checkbox"/> TDF 90/Foreign
<input type="checkbox"/> Payroll	<input type="checkbox"/> WA B&O	Other _____
<input type="checkbox"/> SEP/SIMPLE/401K	<input type="checkbox"/> Pers Prop Tax	_____