



Date \_\_\_\_\_

**Post, Smythe, Lutz & Ziel of Wayne, LLP**  
 4621 S. Wayne Road, Wayne, MI 48184  
 (734)722-9190  
 www.pslzwayne.com

## Basic Taxpayer Information

	TAXPAYER	SPOUSE
Last Name		
First Name		
Soc. Sec. Number		
Birth date		
Drivers License Number		
Occupation		

Street Address	Apt. #		
	City		Zip Code
Home Phone			
Work Phone (T)		Cell Phone	
Work Phone (S)		Cell Phone	
Email (Taxpayer)			
Email (Spouse)			

### Dependent Information

Name First name & middle initial Last name – (if different from yours)	Social Security Number	DOB	Relationship