

# Client Information Form

## Astron Business and Tax Services, LLC

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Date: \_\_\_\_\_

Referred: \_\_\_\_\_

E-Mail: \_\_\_\_\_ OR \_\_\_\_\_

### Taxpayer:

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 D.O.B: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Anniversary Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ County: \_\_\_\_\_ Own: \_\_\_\_\_ Rent: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home #: \_\_\_\_\_ Cell#: \_\_\_\_\_ Work: \_\_\_\_\_  
 Drivers License #: \_\_\_\_\_ Ex Date: \_\_\_\_\_ Issue: \_\_\_\_\_  
 Employer/Business \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Telephone #: \_\_\_\_\_

### Spouse:

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
 D.O.B: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Anniversary Date: \_\_\_\_\_  
 Address: \_\_\_\_\_ County: \_\_\_\_\_ Own: \_\_\_\_\_ Rent: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home #: \_\_\_\_\_ Cell#: \_\_\_\_\_ Work: \_\_\_\_\_  
 Drivers License #: \_\_\_\_\_ Ex Date: \_\_\_\_\_ Issue: \_\_\_\_\_  
 Employer/Business \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Telephone #: \_\_\_\_\_

### Taxpayer:

### Nearest Relative(s):

### Spouse:

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

### Dependents Name:

### Relationship

### D.O.B

### Social Security #:

Dependents Name:	Relationship	D.O.B	Social Security #:
Name: _____		D.O.B: _____	S.S. #: _____
Name: _____		D.O.B: _____	S.S. #: _____
Name: _____		D.O.B: _____	S.S. #: _____
Name: _____		D.O.B: _____	S.S. #: _____

Fundraising: \_\_\_\_\_ Real Estate: \_\_\_\_\_ Trusts & Wills: \_\_\_\_\_  
 Business Loan: \_\_\_\_\_ Business Services: \_\_\_\_\_ C.D.: \_\_\_\_\_  
 Home Mortgage: \_\_\_\_\_ Taxes: \_\_\_\_\_ Paper: \_\_\_\_\_  
 Notes: \_\_\_\_\_ E-Mail: \_\_\_\_\_