

Welcome to H&S Com		Tax Form				
HOW DID YOU HEAR ABOUT US?		То	day's D	ate		
Personal Referral		Yellow Pages				
Please provide name of individual	or business:					
		Other				
We would like to thank them!		Other				
The information below	w will be kept con	nfidential as well	as ever	vthing vou share	with us.	
		BUSINESS		y a mile y ou on an o		
Business Name (if applicable)						
Business Address						
Phone		Tax ID				
	D	ERSONAL				
	Taxpayer	LKJONAL		Spouse		
Name	ιακράγοι			<u> </u>		
Social Security No.						
Date of Birth						
Mobile Phone						
Home Phone						
Email						
Address						
City/State/Zip						
	DE	PENDENTS				
Name		Social Security No.		D	ate of Birth	
Please let us know if you would like	to receive inform	ation on any of th	ne other	services H&S Co	mpanies can provide	
INDIVIDUALS	BUSIN	NESSES				
○ Investment Review	<u> </u>) I.T. Systems Review		_	cession Planning	
Retirement Planning	•	O Payroll Services			tegic Planning	
Tax Reduction Strategies	\mathbf{O}	IR Audit		0	ness Valuation	
Estate Planning	_	Financing Assistance			urance & Attestation	
Education Funding	() F	raud Protection				

Client # _____

Partner _____