



QUESTIONNAIRE OF MIAMI

Name Of Tax Firm	Miami
Tax Specialist Name	Carlos Perez
Email	
First Name	Eric
Middle Name	
Last Name	Gil
Spouse First Name	
Spouse Middle Name	
Spouse Last Name	
Date Of Birth	05/29/1979
Social Security Number	104-64-5840
Marital Status	single
Address Line First	2516 SW 147 Path
City	MIAMI
State	Florida
Zip Code	33185
Rent Or Own	Rent
Occupation	MIAMI
Phone Number	3053008807
Preferred Language	English
Email Address	cmhernandez81@gmail.com
Can You Be Claimed Dependent By Someone	
Income Type	Employer (W2),1099 Misc
Tax Documents	
Other Income	
Expenses	Education
Other Expense	
Deductions	Donate cash or goods to a charity
Health Insurance	Employer Insurance
Other Health Insurance	
Untitled Tax Documents	
Miscellaneous	Sell or buy a home
Other Miscellaneous	
In Debt With Irs Or Ga	No
Need Credit Repair Service	No
Planning Purchasing Home	No
Do You Have Bookkeeping Services	No

Are You Interested In Bookkeeping Services	No
Like Refund Direct Deposited	No
Bank Routing Number	
Bank Account Number	
Taxpayer Signature	
Taxpayer Signature On	08/28/2020
Spouse Signature	
Spouse Signature On	08/28/2020
Spouse Phone Number	
Spouse Email	
Spouse Social Security Number	
Spouse	
Spouse Occupation	
Spouse Date Of Birth	
In Fast Cash Refund Advance	No
In Peace Of Mind	No
Sms Term Conditions	1
Privacy Policy	1
Nofclaiming Dependents	0
Child Attend Daycare	

Authorized Signature _____