

**Primary Taxpayer Name:**

First \_\_\_\_\_ M. \_\_\_\_\_ Last \_\_\_\_\_

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone No: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email: \_\_\_\_\_

Identification

DL# \_\_\_\_\_ Issue Date: \_\_\_\_\_

State: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Questionnaire

\*\*\*Healthcare Coverage: Yes No Maybe

Company Name: \_\_\_\_\_ Member No: \_\_\_\_\_

Student Loans: Yes No Maybe \* Default / Defer

Past Due Debts (State): Yes No Maybe

Federal / IRS Debt: Yes No Maybe

Child Support: Yes No Maybe

Dependant Information

1<sup>st</sup> Name: \_\_\_\_\_

Soc. Sec. No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Relation: \_\_\_\_\_

2<sup>nd</sup> Name: \_\_\_\_\_

Soc. Sec. No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Relation: \_\_\_\_\_

3<sup>rd</sup> Name: \_\_\_\_\_

Soc. Sec. No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Relation: \_\_\_\_\_

**Joint Taxpayer Name:**

First \_\_\_\_\_ M. \_\_\_\_\_ Last \_\_\_\_\_

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone No: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email: \_\_\_\_\_

Joint Filer Identification

DL# \_\_\_\_\_ Issue Date: \_\_\_\_\_

State: \_\_\_\_\_ Exp: \_\_\_\_\_

Questionnaire

\*\*\*Healthcare Coverage: Yes No Maybe

Company Name: \_\_\_\_\_ Member No: \_\_\_\_\_

Student Loans: Yes No Maybe \* Default / Defer

Past Due Debts (State): Yes No Maybe

Federal / IRS Debt: Yes No Maybe

Child Support: Yes No Maybe

Direct Deposit

Name Of Bank: \_\_\_\_\_

Routing Number:

Account Number:

Additional Bank Info

Routing Number:

Acct Number:

Filing Status: \*\* \*REQUIRED\*\*

Single \* Married \* Married / Separate \* Divorced \* HOH

THIS DOCUMENT ACKNOWLEDGES THAT I [REDACTED] HAVE GIVEN KADESH FINANCIAL SERVICES, LLC MY PERMISSION TO PROCESS MY TAX RETURN(S) FOR THE [REDACTED] \*\*\* TAX SEASON. I AM AWARE THAT KADESH FINANCIAL WILL BE IN POSESSION OF MY PERSONAL AND FINANCIAL INFORMATION NEEDED FOR TAX PREPARING. I ALSO GIVE PERMISSION FOR THE PREPARER TO USE AN ONLINE PREPARATION SITE TO PROCESS MY RETURN. I UNDERSTAND THAT THE AMOUNT OF MY REFUND IS NOT GUARANTEED AND MAY BE SUBJECT TO CHANGE UPON APPROVAL FROM THE INTERNAL REVENUE SERVICE. I FURTHER UNDERSTAND THAT BALANCES THAT ARE DUE TO THE U.S.GOVERNMENT, STATE GOVERNMENTS, OR IF ANY LEINS THAT ARE ATTACHED TO MY FEDERAL RETURN MAY BE INTERCEPTED BY THE IRS TO COLLECT A DEBT. IF ANY LEGAL MATTERS SHOULD ARISE I FURTHER AGREE TO SETTLE ANY AND ALL MATTERS WITH AN ARBRITRATOR IN LIEU OF A COURT OF LAW.

In the event of an audit by a taxing authority, you will be required to provide the documentation for all items in question to the taxing authority. It is the taxpayer's (you) responsibility to obtain/retain all documentation that supports your tax liability.

It is your responsibility to provide all the information required for the preparation of a complete and accurate tax return. You should retain all documents, cancelled checks and other data that form the basis of income and deductions for at least the period of the statute of limitations (typically 3 years, but can unlimited in certain situations). You should also retain documents that support items carried over into open years, such as cost basis information, nondeductible IRA's, net operating losses, etc. This information may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the income tax returns; therefore, you should review them carefully before you sign them. Preparation of your income tax returns does not include any procedures designed to discover errors or omissions by you, fraud, misrepresentations, defalcations and/or other irregularities, should any exist. I will render such accounting and bookkeeping assistance as determined to be necessary only for the preparation of your income tax returns. It is your responsibility to provide the company with accurate, truthful information for use in preparing your tax forms.

I will use my professional judgment in resolving questions where the tax law is unclear, or where there may be conflicts between the taxing authority's interpretation of the law and other supportable positions. Unless otherwise instructed by you, I will resolve such questions in your favor whenever possible. The law provides various penalties that may be imposed when taxpayers understate their tax liability. \*\*\* I FURTHER CONSENT TO DISCLOSE THE CORRECT FILING STATUS, ALL FINANCIAL DOCUMENTATION, & SUPPORTING INFORMATION TO MY TAX PREPARER TO AVOID ANY PENALTIES (\$1,000.00 - \$5,000) THAT MAY BE IMPOSED BY THE IRS. [REDACTED] INITIALS \*\*\*

Your returns may be selected for review for any reason by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, I will be available upon request to help you resolve these issues. However, such assistance is not included in your tax preparation fee and I will render additional fees for the time and expense incurred on a case by case basis. Moreover, the taxing authorities may correspond with you regarding your tax return. You agree to timely forward this correspondence to me for review and analysis. Additional fees may be charged depending upon the response required.

Initial \*\*\*No Physical Refund Clause: In the event that you are due a refund and for reasons stated by the IRS or State Taxing Authority that your refund was reduced or taken, you are still responsible for payment because your refund paid a debt that was deemed valid. In the event that payment is not secured, collection efforts shall be enforced to collect payment for services rendered for clients whom may have an offset including but not limited to Federal Tax Debt, State Tax Debt, Student Loans, Child Support Debt, or any Lien against the Tax Refund.

Unless otherwise specified by you in writing (email is sufficient), the company will create/generate a PIN for you that will be used as your signature on your tax forms THIS DOCUMENT IS VALID WITH THE SIGNATURE, INCLUDING SIGNATURES VIA INTERNET AND PDF SUBMISSION, FAX, AND SCAN; OF THE TAX PREPARER AND A KADESH FINANCIAL REPRESENTATIVE.

[REDACTED]

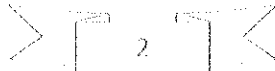
[REDACTED] TAX PAYER

TAX PAYER SSN / TIN

[REDACTED] TAX PAYER SIGNATURE

[REDACTED] KADESH FINANCIAL REPRESENTATIVE SIGNATURE

[REDACTED] DATE



**IDENTIFICATION REQUEST AND FEE CONSENT**

INITIALS

**\*\*\*I HAVE ELECTED TO PROVIDE KADESH FINANCIAL SERVICES, LLC. WITH MY IDENTIFICATION, CONSISTING OF STATE ID, OR STATE DRIVERS LICENSE, AND SOCIAL SECURITY NUMBER OF MYSELF AND DEPENDANTS.\*\*\* OTHER FEDERAL AND STATE IDENTIFICATION / DOCUMENTS MAY BE SUBMITTED TO PROVIDE PROOF OF MY IDENTITY. I UNDERSTAND THAT I MUST PROVIDE THIS INFORMATION TO PROCESS A RETURN. MY INITIALS WILL CONSENT TO MY AUTHORIZING THIS PROCESS. I UNDERSTAND THAT PENALTIES OF PURGERY MAY APPLY FOR SUBMITTING FALSE INFORMATION TO THIS ESTABLISHMENT.**

**FEE SCHEDULE**

INITIALS

**\*\*\*I ACKNOWLEDGE THAT I UNDERSTAND FEES ARE DUE WHEN SERVICES ARE RENDERED. IF ELECTED TO DEDUCT FROM REFUND, IF INTERCEPTION OCCURS, YOU THE TAXAYER ARE STILL RESPONSIBLE FOR FEES DUE TO KADESH FINANCIAL SERVICES.\*\*\*THE FEE SCHEDULE LISTED BELOW IS AN ESTIMATE OF POSSIBLE CHARGES. I UNDERSTAND THE CONDITIONS AND AGREEMENTS PERTAINING TO FEES ARE VALID AND BINDING WHEN INITIALED AND SIGNED. I FURTHER UNDERSTAND THAT IF I REQUEST FOR MY TAX PREPARER TO MAKE HOUSE CALLS I MAY BE BILLED ON AN HOURLY BASIS.**

**\*\*\* MENU OF TAX PREPARATION FEES \*\*\***

- |                                    |                                |
|------------------------------------|--------------------------------|
| ❖ 1040EZ RETURN                    | ❖ AMENDMENTS                   |
| ❖ STATE RETURNS                    | ❖ AUDITS HOURLY BILLING        |
| ❖ 1040 RETURN                      | ❖ MOBILE SERVICES              |
| ❖ FED, STATE, &                    | ❖ MILEAGE & FUEL CHARGES APPLY |
| ❖ ADDITIONAL SCHEDULES             | ❖ NON PROFIT SETUP             |
| ❖ ESTATE & TRUST LARGE BUSINESS    | ❖ 501c3 ASSISTANCE             |
| ❖ (C) CORP / (S) CORP TRANSMIT FEE | ❖ PAYROLL SERVICES             |
|                                    | ❖ BOOKKEEPING SERVICES         |

**I, THE TAXPAYER, UNDERSTAND THAT OTHER SERVICE CHARGES OR ATTEMPTS TO COLLECT A DEBT MAY APPLY. CLIENTS THAT REQUEST A REPRESENTATIVE OF KADESH FINANCIAL SERVICES TO TRAVEL TO THEIR ESTABLISHMENT WILL INCUR ADDITIONAL SERVICE CHARGES. THIS WILL INCLUDE TRAVELING THRU OUT THE GREATER METRO ATLANTA AREA AND ANY OTHER DESTINATIONS REQUESTED FOR SERVICE. PLEASE BE ADVISED THAT ADDITIONAL CHARGES MAY APPLY IF EXCESSIVE FAXING, PHONE CALLS, COPIES, AND MULTIPLE TRIPS OCCUR. PRICES ARE SUBJECT TO CHANGE DUE TO COST OF LIVING INCREASES. RESEARCH FEES MAY INCUR FOR CLIENTS THAT WISH TO FILE A RETURN USING THEIR LAST CHECK STUB. SIGNING THIS AGREEMENT CONSENT TO BILLING AMOUNT FOR SERVICES PROVIDED. THIS AGREEMENT SHALL BE BINDING BETWEEN THE TAXPAYER OR ORGANIZATION AND KADESH FINANCIAL SERVICES, LLC.**

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 DATE

**Confidentiality Agreement / Privacy Policy**

This Confidentiality Agreement is made between Kadesh Financial Services, LLC and you the Taxpayer. This Agreement shall continue in full force and effect for the duration of my relationship with Kadesh Financial Services, LLC and shall continue thereafter until terminated.

**Definition Of "Confidential Information"**

As used herein, "Confidential Information" shall mean any and all technical and non-technical information related to tax preparation provided by either party to the other, including but not limited to (a) patent(s) and patent applications, (b) trade secret, and (c) copyrighted information (d) proprietary information— Ideas, techniques, sketches, drawings, works of authorship, models, inventions, know-how, processes, apparatuses, equipment, algorithms, software programs, software source documents, and formulae related to the current, future, and proposed products and services of each of the parties, and including, without limitation, their respective information concerning research, experimental work, development, design details and specifications, engineering, financial information, procurement requirements, purchasing, manufacturing, customer lists, investors, employees, business and contractual relationships, business forecasts, sales and merchandising, marketing plans and information the disclosing party provides regarding third parties. However, confidential information does not include any information, which is readily available and known to the public.

**Identification of Confidential Information**

~If the Confidential Information is embodied in tangible material (including without limitation, software, hardware, drawings, graphs, charts, disks, tapes, prototypes and samples), it shall be labeled as "Confidential" or bear a similar legend. If the Confidential Information is disclosed orally or visually, it shall be identified as such at the time of disclosure.~

**\*\*\*Protection Of Confidential Information \*\*\***

Each party agrees that at all times and notwithstanding any termination or expiration of this Agreement it will hold in strict confidence and not disclose to any third party Confidential Information of the other, except as approved in writing by the other party to this Agreement, and will use the Confidential Information for no purpose other than tax preparation, including banking, collections, and any other tax related purposes with the other party to this Agreement. Each party shall only permit access to Confidential Information of the other party to those of its employees or authorized representatives having a need to know and who have signed confidentiality agreements or are otherwise bound by confidentiality obligations at least as restrictive as those contained herein.

\_\_\_\_\_  
Taxpayer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Tax Preparer Signature

\_\_\_\_\_  
Date

**Release of Responsibility**

I release Kadesh Financial Services, LLC from all liability, claims, actions, costs, and expenses, however caused, which might arise on account of injury to me (including death) or other Internal Revenue Service issues in connection with my participation in related transactions. If any legal matters should arise I agree to settle by an arbitrator in lieu of a court of law. By signing this release, I accept full responsibility for the risk of any occurrences, injuries, accidents, death, or property damage due to negligence or misconduct of the parties being released while I am participating in such activities.

\_\_\_\_\_  
Taxpayer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Tax Preparer Signature

\_\_\_\_\_  
Date

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Consent to Use Of Tax Return Information**Kadesh Financial Services, ("we," "us" and "our")**

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot use your tax return information for purposes other than the preparation and filing of your tax return without your consent. You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation services on your consent, your consent will not be valid. Your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.

If you do not consent, then you may still have your tax return prepared and electronically filed by us for a fee. For your convenience, we have entered into arrangements with a bank to provide qualifying taxpayers with the opportunity to **Direct Deposit** apply for financial products (**Loan, Electronic Refund Check, or Electronic Refund Deposit**). To determine whether these products may be available to you, we will need to use your tax return information by analyzing it and calculating the amount of your anticipated refund. If you would like us to use your tax return information to determine whether these products may be available to you while we are preparing your return, please sign and date this consent to the use of your tax return information. By signing below, you (including each of you if there is more than one taxpayer) authorize us to use the information you provide to us during the preparation of your (20\_\_\_\_) tax return to determine whether to present you with the opportunity to apply for these products and services.

Consent to Disclosure Of Tax Return Information**Kadesh Financial Services, ("we," "us" and "our")**

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than those related to the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution. You are not required to complete this form. Because our ability to disclose your tax return information to another tax return preparer affects the tax return preparation service(s) that we provide to you and its (their) cost, we may decline to provide you with tax return preparation services or change the terms (including the cost) of the tax return preparation services that we provide to you if you do not sign this form. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature. In order to process your return we must disclose all of your (20\_\_\_\_) tax return information to provide certain services. If you will **allow us to disclose your current tax return information to IRS or any of the state taxing departments** for this purpose, sign and date your consent to the disclosure of your tax return information. By signing below, you (including each of you if there is more than one taxpayer) authorize us to disclose to all of your (20\_\_\_\_) tax return information. If you are not willing to authorize us to share your tax information with the other firms, you can still choose to have your tax return prepared and filed by us for a fee.

Printed Name of Taxpayer: \_\_\_\_\_

Taxpayer Signature: Date: \_\_\_\_\_

Printed Name of Joint Taxpayer: \_\_\_\_\_

Joint Taxpayer Signature: Date: \_\_\_\_\_