



J. Allen & Associates

PO Box 2049
Frederick, MD 21702

*** Please also bring copies of social security cards, birth certificates, driver's licenses and child's report card with address if prove of dependency is required.

Taxpayer

Full Name	
Occupation	
SSN	
Date of Birth	
Contact #	
Email	

Spouse

Full Name	
Occupation	
SSN	
Date of Birth	
Contact #	
Email	

Current Address _____

City: _____ State: _____

Zip Code: _____

County : _____

Dependents

Legal Name	Birthdate	SS#

Bank Account Info

Bank Name: _____ Routing # _____ Acct# _____

Use for Refund only [] Use for both refund or taxes due []