



2020 PERSONAL TAX SERVICES ENGAGEMENT LETTER

This letter is to confirm our understanding of the terms and objective of our tax services engagement and to clarify the nature and limitation of the tax services to be provided.

We will prepare your returns from information which you furnish to us. You represent that the information you are supplying to us is accurate and complete to the best of your knowledge. We will not verify the information you give us; however, we may ask for additional clarification of some information. You have the final responsibility for the income tax returns and therefore, you should review them carefully before you sign the returns or the e-file transmittals.

As you know, your returns are subject to examination by the taxing authorities. In the event of an audit, you may be requested to produce documents, records, or other evidence to substantiate the items of income and deductions shown on your tax returns. The law provides a penalty to be imposed upon the taxpayer where there is a substantial understatement of tax liability. If you would like information on the amount or circumstances of the penalty, please let us know.

We will use our judgment in resolving questions where the tax law is unclear, or where there may be conflicts between the taxing authorities' interpretations of the law and other supportable positions. Unless otherwise instructed by you, we will resolve such questions in your favor whenever possible. If during your work, we discover information that affects our prior year tax returns, we will make you aware of the facts. However, we cannot be responsible for identifying all items that may affect prior year returns. If you become aware of such information during the year, please contact us to discuss the best resolution of the issue.

All invoices are due and payable upon receipt. Tax returns will not be filed or released to you until our fees for the return have been paid.

Please indicate your acceptance of the above understanding by signing below.

Accepted by _____

Date: _____



2020 Tax Refund Direct Deposit Authorization Form

I, _____, here by authorize Bell Mutual Financial Services to setup my federal &/or state tax refund(s) for direct deposit in the bank account listed below:

Client Name: _____

Phone Number: _____

Financial Institution: _____

Street Address: _____

Acct Type: _____

Routing #: _____

Acct #: _____

Please attach a blank copy of a check or voided check.

Thank you.

By signing and dating this document you are authorizing Bell Mutual Financial Services to make deposits into your account.

Signature: _____

Date: _____



Date: _____

Type of Filing

7-10 Business Days: ____ Regular You Mail: ____ Regular Electronic: ____

Payment for tax preparations:

Check _____ Credit Card _____ Take out of refund if any: _____

Filing Status

Married: ____ Single: ____ Head of household: ____

Name: _____ Spouse: _____

SS#: _____ SS#: _____

DOB: _____ DOB: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Cell: _____ Home: _____ Work: _____

Email: _____

Has your name changed? Yes ____ No ____

If yes, name before: _____

Dependents:

Name: _____ DOB: _____ SS#: _____

Relationship: _____ Months at home: _____

Name: _____ DOB: _____ SS#: _____

Relationship: _____ Months at home: _____

Name: _____ DOB: _____ SS#: _____

Relationship: _____ Months at home: _____

Would you like us to quote you on insurance? Yes: ____ No: ____

Who is your current insurance provider? _____



Recovery Rebate Credit Information

What is the amount of the first economic impact payment (Stimulus Check) your household received?

Total Amount: if not received please write N/A: _____

What is the amount of the second economic impact payment (Stimulus Check) your household received?

Total Amount: if not received please write N/A: _____

Name _____ Date _____