

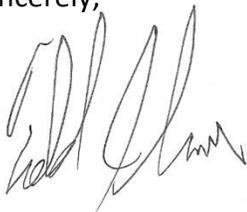
January 17, 2014

To whom this may concern:

We are able to set our tax preparation fees at low reasonable levels because we use methods such as the attached forms to help us collect, report, and process your information. Please enter your information in the designated areas on the attached Tax Organizer Form, and include all applicable documents checked off on the Checklist. If you additional assistance in completing these forms, please do not hesitate to contact me via email (todd@lctaxsolutions.com) or phone (509-758-6070). For security reasons, we prefer that you send completed forms and accompanying documents via certified mail to:

LC Tax Solutions LLC
Attn: Todd Snarr
744 5th Street, Suite G
Clarkston, WA 99403

Sincerely,



Todd J. Snarr



Tax Organizer

PART I – PERSONAL INFORMATION

TAXPAYER

Last Name _____

First Name _____ MI __ Suffix (Jr./Sr./II) _____

SSN ____ - ____ - ____ DOB __ / __ / __

Occupation _____

Address _____
Street or PO Box

City State Zip Code

Contact Information

Home Phone Work or Cell Phone

Email Address @

SPOUSE

Last Name _____
(If Different)

First Name _____ MI ____ Suffix _____

SSN ____ - ____ - ____ DOB __ / __ / __

Occupation _____

Contact Information

Cell Phone Work Phone

Email Address @

PART II – DEPENDENT INFORMATION

Last Name, if different _____

First Name _____ MI __ Suffix _____

SSN ____ - ____ - ____ DOB __ / __ / __

Total months lived with taxpayer: _____

Total childcare expenses, if any: \$ _____

Total educational fees paid, if any: \$ _____

Can another person claim child: YES or NO

Last Name, if different _____

First Name _____ MI __ Suffix _____

SSN ____ - ____ - ____ DOB __ / __ / __

Total months lived with taxpayer: _____

Total childcare expenses, if any: \$ _____

Total educational fees paid, if any: \$ _____

Can another person claim child: YES or NO

Our tax and payroll services cannot be beat. We are in Clarkston at 744 Fifth Street.



PART IV – DEPENDENT CARE PROVIDER’S INFORMATION

Name _____	ID Number or SSN _____	Amounts Paid \$ _____
Address _____	_____	_____
Street	City	State Zip Code
ADDITIONAL DEPENDENT CARE PROVIDER		
Name _____	ID Number or SSN _____	Amounts Paid \$ _____
Address _____	_____	_____
Street	City	State Zip Code

PART V – CHECK LIST

Please provide the following information for the filing year:

- _____ Original W-2 forms
- _____ Schedule(s) K-1 showing income or loss from partnerships, S-Corporations, estates or trusts
- _____ Copies of other compensation or pension documentation, such as Form 1099-MISC or Form 1099-R
- _____ Form(s) 1099 (DIV or INT) or statements reporting dividend & interest income
- _____ Form(s) 1099-B or brokerage statements showing transactions for stocks, bonds, etc.
- _____ Form(s) 1098 reporting interest paid, copies of real estate tax bills and other information relating to real property holdings
- _____ Copies of closing statements regarding the sale or purchase of real property (i.e. home, etc.)
- _____ All other information notices you received, or any items you have questions about
- _____ A copy of the previous year’s tax return (if we did not prepared your tax returns last year)

Our tax and payroll services cannot be beat. We are in Clarkston at 744 Fifth Street.

PART VI – REFUND OPTIONS

Circle the refund option you prefer in the table below and provide the **additional bank information** if necessary.

Option	Description	Additional bank Information
1 IRS Direct Deposit	Preparation fees (click here to view our fee schedule) are paid up front prior to return transmission. The IRS/State Tax Commission deposits your refund into one or more accounts (checking and/or savings). This option reduces the chance of your refund being lost or stolen in the mail. You will receive your refund within 2 weeks if you electronically file or within 8 weeks if you paper file.	<p>Checking or Savings</p> <p>Routing number</p> <p>Account number</p>
2 IRS Mailed Check	Preparation fees (click here to view our fee schedule) are paid up front prior to return transmission. The IRS/State Tax Commission mails your refund to your mailing address. This option allows you to receive your refund within 3 weeks if you electronically file or within 8 weeks if you paper file.	
3 Intuit Refund Debit Card	Preparation fees (click here to view our fee schedule) are paid up front prior to return transmission. If you do not have a bank account, you can authorize the IRS/State Tax Commission to a deposit your refund into a pre-paid Visa debit card account. You will receive the card in the mail within 7-10 days of your return being accepted, but the funds may not be available for up to 7 more days.*	
4 Refund Transfer Direct Deposit	No payment needed because preparation fees (click here to view our fee schedule) are deducted from federal refund. The IRS/State Tax Commission will deposit your refund into your bank account via Santa Barbara Bank & Trust (SBBT). This option reduces the chance of your refund being lost or stolen in the mail. You will receive your refund within 2 weeks after your electronically filed return is accepted. However, processing/convenience fees of \$35 for federal refunds and \$10 for state refunds are assessed by SBBT. These fees along with all tax preparation fees are automatically deducted from your federal refund.	<p>Checking or Savings</p> <p>Routing number</p> <p>Account number</p>
5 Refund Transfer Check	No payment needed because preparation fees (click here to view our fee schedule) are deducted from federal refund. You can arrange to pick up your refund check at the LC Tax Solutions office in downtown Lewiston, Idaho. Checks are available 2 weeks after electronically filed returns are accepted. However, as in option 4, refunds are processed via SBBT, which assesses fees of \$35 for federal refunds and \$10 for state refunds. These fees along with all tax preparation fees are automatically deducted from your federal refund.	

*Additional debit card fees apply, for more information see https://refundcard.intuit.com/support/faq_refundcard.html