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Farmington Hills, MI 48334

2017 Tax Year Questionnaire

Your name: First Last Social Security Number Date of Birth Occupation

Spouse name: First Last (if different) Social Security Number Date of Birth Occupation

Dependents

Name: First Last (if different) Social Security Number Date of Birth Relationship

Name: First Last (if different) Social Security Number Date of Birth Relationship

Name: First Last (if different) Social Security Number Date of Birth Relationship

Name: First Last (if different) Social Security Number Date of Birth Relationship

Current address

Street Number and Name City State Zip Code

If you moved during 2017, indicate date here _____ and enter the old address:

Street Number and Name City State Zip Code

Your Residency status – circle one

- US Citizen Permanent resident (green card)
- Alien – check the visa type and indicate:
 - Work Student Guest Other (indicate) _____
 - how many days stayed in US in 2017 _____; 2016 _____; 2015 _____;

How we can contact you?

Home (____) _____ **Fax** (____) _____

Work (____) _____ **E-mail** _____

Cell (____) _____ **Other** _____

Who shall we thank for the referral? _____