

MENDEN
ACCOUNTING & TAX SERVICE

Please print

Date: _____

Name: _____
Taxpayer First & Last Name Spouse First & Last Name

Preferred person to contact for questions: _____

Preferred Contact Phone Number: _____ **Email:** _____

Preferred method of contact for questions: Phone Call or Email

Do you want a follow up review appointment? If yes, virtual meeting or telephone call.
We will call you to schedule this appointment.

Would you like your tax returns issued to an online portal? You will receive an invitation to create an account.

Additional copies of your return either electronic or paper will incur an additional fee of \$15

Yes or No