

# Federal Information Worksheet

2025

Ashby & Associates

TAX SERVICE / ACCOUNTING / PAYROLL



## Part I - Personal Information

### Taxpayer:

Last Name  
First Name  
Middle Initial  
Social Security Number  
Occupation  
Date of Birth

### E-mail Address

Work Phone  
Cell Phone  
Home Phone

Address1  
Address2  
City  
State  
Zip

### Spouse:

Last Name  
First Name  
Middle Initial  
Social Security Number  
Occupation  
Date of Birth

### E-mail Address

Work Phone  
Cell Phone  
Home Phone

Address1  
Address2  
City  
State  
Zip

## Part II - Federal Filing Status - Use a Checkmark or "x" to indicate your status - just click

Single  
Married - Jointly  
Married - Separately  
Did NOT live w/ spouse  
Eligible to Claim Spouse  
Head of Household  
Qualifying Widow(er)  
Year Spouse Died

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PRINT

## Part III - Dependents

### DEPENDENT1

Last Name  
First Name  
Middle Initial  
Social Security Number  
Date of Birth

### Relationship: - Use a Checkmark or "x" to indicate status

Son  
Daughter  
Step-Child  
Foster Child  
Grand-child  
Other

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### DEPENDENT2

Last Name  
First Name  
Middle Initial  
Social Security Number  
Date of Birth

### Relationship: - Use a Checkmark or "x" to indicate status

Son  
Daughter  
Step-Child  
Foster Child  
Grand-child  
Other

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### DEPENDENT3

Last Name  
First Name  
Middle Initial  
Social Security Number  
Date of Birth

### Relationship: - Use a Checkmark or "x" to indicate status

Son  
Daughter  
Step-Child  
Foster Child  
Grand-child  
Other

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### DEPENDENT4

Last Name  
First Name  
Middle Initial  
Social Security Number  
Date of Birth

### Relationship: - Use a Checkmark or "x" to indicate status

Son  
Daughter  
Step-Child  
Foster Child  
Grand-child  
Other

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