

Project Routing Sheet

Client Records:

Client: Jones, Ron & Jenny (JONESRJ)	Due Date: _____
Project: Individual Income Tax Return (491)	Update Client Information <input type="checkbox"/>

Project Information	
Biller:	
Last Pmt Date:	10/31/2013
Last Pmt Amt:	-\$1,750.00
Current Balance:	\$0.00
Current WIP:	\$0.00

Client Information	
Contact Name: Ron Jones	
Primary Phone: (210) 854-5255	
Mobile Phone:	
Email:	jenjonesr@com.cast.net
Address:	321 Lane Apartment 123 Bad Axe, MI 48111

Billing Information:	
From Billing Run at Month End	<input type="checkbox"/>
Bill with Return from UltraTax	<input type="checkbox"/>
Amount \$ _____	

INVOICE MUST BE PAID ON PICKUP

Type of Return:

E FILE RETURN		
<u>Individual</u>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<u>Income Tax</u>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<u>Return</u>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Type of Return (cont.)

E FILE RETURN		
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Disposition of Return:		Client Records:	
Mailing	<input type="checkbox"/>	None	<input type="checkbox"/>
Client Pickup	<input type="checkbox"/>	Scan	<input type="checkbox"/>
Fed Ex	<input type="checkbox"/>	Date	_____
Hold for F/S	<input type="checkbox"/>	Initials	_____

Additional Information: / Changes in status or Dependents from Prior Year?

Banking Information	
_____	Check in Mail
_____	Direct Deposit
Bank Name	_____
Route #	_____
Acct #	_____
Estimate Information	
_____	Estimates Paid
_____	Yes
_____	No
_____	For the amount set up by our office?

Client Contact for Pick Up	Initials	Date
1st:		
2nd:		
3rd:		
4th:		