

PERSONAL DATA SHEET

1/1/2022

			OF.	EDAL INICAS	NA A TIO	N		
GENERAL INFOR TAXPAYER					SPOUSE			
First Name		IA	APATER			350035		
Last Name								
Soc Sec #								
Occupation								
Birth Date								
Phone: Home								
Cell								
Work								
Email								
			ADD	RESS INFOR	RMATO	N		
Address								
City, State, Zip								
			E-F	ILE INFORM	IATION			
Bank Name			Routing Number			Account Number	Chk	Sa
DEPENDENTS								
Name		B	Birth Date Social Secu			Relationship		
IVAITIC			mui Bate	Coolai Co	ourity n	Son Daughter	<i></i>	
						Son Daughter Daughter		
						Son Daughter D		
						Son Daughter D		
						Son Daughter		
						Son Daughter		
						Son Daughter		
CHURCH CONT CHARITABLE C NON-CASH CO	ONTRIBUTI	ONS \$	S					
MEDICAL INS P	PREMIUMS	B		TOTAL OTH	IER MEI	DICAL \$		
MORTGAGE INTEREST \$				PROPERTY TAXES \$				
CHILD CARE E	XPENSES							
PROVIDER NAME			EIN# OR SOC SEC #					
ADDRESS			PAID \$					
PROVIDER NAME			EIN# OR SOC SEC #					
ADDRESS						PAID \$	S	
PROVIDER N		EIN# OR SOC SEC #						
ADDRESS						ΡΔΙΓ	2 (