

AARP Foundation Tax-Aide Drop-Off Document Inventory Checklist

This Drop-off Document Inventory Checklist ("checklist") must be used for every taxpayer that has their taxes prepared using the Drop-Off model. The two page checklist should be printed and firmly attached to the envelope holding the taxpayer's documents. DO NOT SEPARATE FROM DOCUMENT ENVELOPE until return is delivered to taxpayer.

Taxpayer Name (Last, First): _____ **Tax Years Prepared:** _____ **State Returns Prepared:** _____

Taxpayer Phone and / or Email Address _____

FORMS (add as needed)	SSN*	ID*	14446	I&I 13614-C	Voided Check (If Direct Deposit is requested)	Prior Yr Return	W-2	1099						COMMENTS
Initial Receipt (requires signatures on Page 2) Initials Date														
Reason for Access (Circle One) I&I Prep QR Other [Specify] Initials and Date														
Reason for Access (Circle One) I&I Prep QR Other [Specify] Initials and Date														
Reason for Access (Circle One) I&I Prep QR Other [Specify] Initials and Date														
Reason for Access (Circle One) I&I Prep QR Other [Specify] Initials and Date														
Reason for Access (Circle One) I&I Prep QR Other [Specify] Initials and Date														
Return to Taxpayer (requires Page 2 signatures) Initials and Date														

* Social Security Cards and IDs should not be retained, this is confirmation that the information is noted on tax forms, to confirm taxpayer's identification in conversations and eventual tax filing.

Document Receipt from Taxpayer (Complete during 1st appt)

I confirm documents checked on the "Initial Receipt" row accurately reflect the documents I am leaving with Tax-Aide on:

Today's Date and Time

Taxpayer Signature

Tax-Aide Confirmation:

Volunteer First Name + Last Initial (Please Print)

Document Return to Taxpayer (Complete during 2nd appt)

I confirm that I have received:

- _____ Completed Federal Tax Return,
- _____ Completed State Tax Return(s) (Please include state abbreviation)
- _____ Documents listed in the "Document Return" row

Today's Date and Time

Taxpayer Signature

Tax-Aide Confirmation:

Volunteer First Name + Last Initial (Please Print)

Document Destruction Disclosure (Complete during 1st appt)

I confirm that I will return to the Tax-Aide site on a Date and Time that is mutually determined to obtain my completed tax return and accept the delivery of the documents left in the possession of Tax-Aide volunteers.

If I do not return, Tax-Aide will make a good faith effort to contact me to reschedule the tax return and document delivery.

If I do not respond, or I do not return to the site, I understand that:

1. Tax-Aide will destroy all documents left in their possession
2. Tax-Aide will not retain or electronically file the tax return that they prepared.

Today's Date and Time

Taxpayer Signature

Tax-Aide Confirmation:

Print Volunteer First Name + Last Initial

FOR TAX-AIDE PURPOSES ONLY

Missed Appointments: Indicate Dates / Times

Follow Up Contacts: Indicate Date, Time, Method of Contact (Phone, Email, Mail)

Attempt #1: _____

Attempt #2: _____

Document Destruction: **

LC Signature – Vol ID, First Name and Last Initial

Date and Time of Document Destruction

Witness to Destruction– Vol ID, First Name and Last Initial, Date

****Final Incident Report should be filed with DC, SC, RC, and AND within 24 hours**