

Volunteer Income Tax Assistance Program
State of Michigan And City of Flint Intake Sheet

What school district do you live in? _____

Did you live in Michigan for the entire year? Yes No (when moved? _____)

Is anyone in your household deaf, blind, or totally and permanently disabled? Yes No

Did you purchase any major items from catalogs or over the internet? Yes No

If Yes, did you pay MI sales tax? Yes (done) No How much did you purchase? _____

Do you own your home or do you pay rent? Own Rent

Own: Must have your 2025 property tax statements. If not, taxpayer must come back with them.

Rent: How much rent do you pay per month? _____ Number of months _____

What is the name of your landlord (or apartment complex)? _____

What is your landlord's address (street, city, state, zip)? _____

If moved during the year:

How much rent did you pay per month at previous address? _____ Number of months _____

What is the address of your previous home? _____

What was the name of your previous landlord? _____

What was your previous landlord's address (street, city, state, zip)? _____

Last year, did you receive:

Child Support Yes No If so, how much? _____

Workers' compensation Yes No If so, how much? _____

Veterans' disability Yes No If so, how much? _____

DHS/FIP cash assistance Yes No If so, how much? _____

(does not include food stamps) _____

Do you have your January or February Consumers bill? Yes No (If No, OK, do not send home!)

Is your heat included in your rent payment or in someone else's name? Yes No

What is your race/ethnicity/nationality? (circle one) White/Caucasian African American/Black Arab
Asian Indian Asian Pacific Latino/Hispanic Native American Multi Ethnic No Answer

How did the client file last year? (circle one) VITA-FPL VITA-UMF VITA-Other

Paid Preparer Self-Prepared Friend Did not file Other

Do you live in the City of Flint? Yes No (If Yes, must do a City Resident return)

Do you work in the City of Flint? Yes No (If Yes, must do a City return)