



Donovan CPAs

New Estates & Trusts Client Information

*Date _____

Referred by _____ *EIN # _____

***Entity Type**

Estate Grantor Trust Simple Trust Complex Trust Other

*Entity Name: _____

*Fiduciary Name: _____

Fiduciary Title: _____

Date of Death _____

*Contact / Attention: _____

*Address: _____

*City/State/Zip: _____

*County: _____

*Phone: _____ Cell: _____

*Email: _____

Electronic Enhancements

You may now send/receive your tax documents securely through our Client Portal as well as receive text message notifications when your tax return is ready to be picked up.

*Would you like to sign up for the Secure Client Portal? Yes No

Email used for the portal _____

*Would you like to receive Text message Notifications? Yes No

Cell Phone # _____

Spouse Cell Phone # _____

Additional Information

Beneficiaries:

Name: _____

Address: _____

City/State/Zip: _____

SSN: _____

EIN: _____

Please provide our office the following documents:

- Trust Documents (Relevant Sections)
- Will (Estate)
- Copy of IRS Notification (if available)
- Prior Year Tax Return (if available)

*In office use only

PIC: _____

Reviewer: _____

Preparer: _____

FYE: _____ Due Date: _____