

INDIVIDUAL IT12 CLIENT DETAILS

TAXCO CLIENT CODE

TAXCO FIRM

TAXCO GROUP

CLIENT NAME

PROFESSION

ENTITY TYPE

INDIVIDUAL

DIRECTOR

MEMBER

OTHER

Contact First name

Middle Name

Last Name

EMAIL

PHONE CELL

BUSINESS

ID /PASSPORT NO.

GENDER

 M / F

MARITAL STATUS

SINGLE

In COP

Out COP

OTHER

PARTNER NAME

ID

DEMOGRAPHIC

AFRICAN

WHITE

COLOURED

ASIAN

DISABILITY

NO

YES

TAX NR

LOGINS

EFILING

BANK NAME

ACC NR

ACCOUNT TYPE

BRANCH

ADDRESS

PHYSICAL/POSTAL

SERVICES

INCOME TAX

PROV TAX

OTHER

INCOME TAX INFO

IRP5

INTEREST

ANNUITY

CAP GAIN

MEDICAL

R/A

TRAVEL

OTHER

CLIENT SIGNATURE

DATE