

Beach Side Taxes
1277 Belridge Street Unit 9B
Oceano CA 93445
PH: 714-220-8077
PH: 562-326-9587 (espanol)

Personal Information

State of Residence (during tax year):	Filing Status: Married Single HH Widow
Taxpayer Name (first middle last):	Taxpayer Spouse Name (first middle last):
SSN: - -	SSN: - -
Occupation:	Occupation:
DOB:	DOB:
Street Address:	Street Address:
City, State, Zip Code:	City, State, Zip Code:
Email:	Email:
Phone:	Phone:

Dependent Information

Name of Dependents	SSN	DOB	Relationship to Taxpayer	College Student?

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Bank Information

Complete if you receive a refund and want it sent electronically.

Name of Bank:	Type of Account (circle one) : ☒ Checking ☐ Savings
Routing Number:	Account Number: