

Headquarters

875 S Main St  
Plymouth  
Michigan 48170  
734.454.4100

Down River

7915 Allen Road  
Allen Park  
Michigan 48101  
313.388.7180

Northern Michigan

P O Box 627  
Grayling  
Michigan 49738  
989.348.4055

Oakland County

2310 E 11 Mile Rd  
Royal Oak  
Michigan 48067  
248.399.7331

We at ATS Advisors would like to express our gratitude for our clients. COVID-19 has required companies around the world to incorporate safety protocols and we appreciate your cooperation and patience while we diligently work to provide professional services while creating and maintaining safe practices.

As the new tax season fast approaches COVID-19 continues to spread in record numbers, ATS is carefully monitoring local, state, and federal laws and guidelines and is taking proactive measures to minimize risk to our clients and employees. It is with this in mind we will continue to operate with minimal client contact.

Below are the ATS office operating procedures for the 2020 tax season and beyond as necessary to ensure the safety of everyone.

**ATS ADVISORS TAX SEASON CLIENT PROCEDURES**

- ☘ Drop box/slots are located at each office for 24-hour drop off of tax documents.
- ☘ While we will not offer in-person meetings, our staff is happy to schedule phone appointments after dropping off tax documents and after pick up of completed tax returns for review.
- ☘ Completed tax returns will be mailed, via USPS with tracking; or an electronic copy will be made available. Other delivery options are available and may be subject to fees.

While our processes have evolved adapting to the changes required by COVID-19, our commitment to our clients and providing excellent service continues.

Please go our to website at [www.atscpas.com](http://www.atscpas.com) for up to date information for each our locations, or contact your preferred office if you have questions.

Headquarters  
875 S Main St  
Plymouth  
Michigan 48170  
734.454.4100

Down River  
7915 Allen Road  
Allen Park  
Michigan 48101  
313.388.7180

Northern Michigan  
P O Box 627  
Grayling  
Michigan 49738  
989.348.4055

Oakland County  
2310 E 11 Mile Rd  
Royal Oak  
Michigan 48067  
248.399.7331  
248.544.6160

Dear Clients,

Happy New Year from all of us at ATS Advisors. We know that 2020 was a trying and unique year for everyone. We hope that you are all safe and healthy as we begin what we hope will be a much better year. For your convenience and to help you get your tax information organized, our **2020 Organizer and supporting forms** are now available for download on our website:

**www.atcpas.com.**

(top right corner of the home page)

{If you prefer a paper copy please call or e-mail us and we will send you a copy ASAP}

Please note, in addition to your 2020 tax documents (W-2's, 1099's, etc.) we **MUST** also have the following:

1. **Signed** 2020 Engagement Letter.
2. **Completed** 2020 Income Tax Organizer.
  - a. If you have any of the special situations below, our worksheets are available for download at **www.atcpas.com**.
    - Sole proprietorships (Schedule C Worksheet)
    - Rental properties (Schedule E Worksheet)
    - Medical expenses worksheet
    - Charitable Contributions Worksheet – Cash and Non-Cash

We continue to offer **paperless** options. Simply provide a blank flash drive\* along with your original tax documents.

\* **PLEASE NOTE: FOR SECURITY PURPOSES ALL FLASH DRIVES WILL BE FORMATTED AND ANY INFORMATION ON THE FLASH DRIVE WILL BE DELETED PRIOR TO TRANSFER OF YOUR TAX FILES.**

**Please remember the following regarding your 2020 tax information:**

1. **An extension of time to file is NOT an extension of time to pay.** If you need to file an extension and you owe money, you must pay the amount owed (on or before April 15, 2021) or face penalties & interest.
2. Payment of our fees is due upon completion of your return(s). Payment of our fee for returns being delivered must be received prior to delivery. **We cannot e-file your tax returns without payment.**
3. If your tax information is not received in our office by **April 1, 2021**, we do not guarantee the completion of your return by the IRS tax filing deadline and we will file an automatic extension.

**Our Services:**

**Drop-off service is REQUIRED** for tax preparation. If an appointment is necessary, please contact your preferred ATS office to schedule a telephone or zoom appointment with one of our tax professionals. You must drop off your tax materials **BEFORE** your telephone or zoom appointment so we may have time to review your documents prior to the meeting.

ATS offices will begin extended tax season hours on February 8, 2021 as follows:

**Monday through Friday**

**9:00 AM to 6:00 PM**

**Saturdays**

**10:00 AM to 2:00 PM**

**A secure drop box is available 24/7 at each office.**

We are looking forward to working with you to successfully complete your 2020 tax returns. If you have any questions, please feel free to contact us at any time.

Best Wishes and Happy New Year.

Respectfully,



ATS Advisors,

A Certified Public Accounting Firm

**Remember... your referral is our best advertising:  
If you were pleased with our service, tell friend. If you were not, please tell us.**



[www.atscpas.com](http://www.atscpas.com)

**Your referral is our best advertising!**

For each referral coupon that results in a NEW client, we will send you

**\$25.00**

It's simple and easy, and most of all, it's our way of saying "Thank you".

YOUR NAME: \_\_\_\_\_

New Client Referral: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Comments: \_\_\_\_\_

- Plymouth 734.454.4100
- Down River (Allen Park) 313.388.7180
- Northern Michigan (Grayling) 989.348.4055
- Oakland County (Royal Oak) 248.399.7331



Date \_\_\_\_\_

875 South Main Street, Plymouth, MI 48170  
 734-454-4100 phone ~ 734-454-1300 fax  
 www.atscpas.com

### Basic Taxpayer Information

	TAXPAYER	SPOUSE
Last Name		
First Name		
Soc. Sec. Number		
Birth date		
Drivers License Number		
Occupation		

Street Address	Apt. #		
	City	Zip Code	
Home Phone			
Work Phone (T)		Cell Phone	
Work Phone (S)		Cell Phone	
Email (Taxpayer)			
Email (Spouse)			

### Dependent Information

Name First name & middle initial Last name – (if different from yours)	Social Security Number	DOB	Relationship

For Office Use Only: Date Init Date Init

Datebase Updated:		Outlook Updated:	
Entered in QB:		Notes:	

**ENGAGEMENT LETTER  
2020 TAX PREPARATION**

As required by regulations and for purposes of clarity, we have included this engagement letter to confirm our understanding of the terms and objectives of the tax return preparation engagement and the nature and limitations of the services we will provide to you for the year ended December 31, 2020 and to clarify the nature and extent of the tax services we will provide.

**Services Provided**

We will prepare the Federal and State (and city/local if indicated) **individual income tax returns** for calendar year ending December 31, 2020. We are not responsible for returns not included on this engagement letter.

We are under no duty to review the information you provide to determine whether you may have a filing obligation with another state. If we become aware of any other filing requirement, we will tell you of the obligation and may prepare the appropriate returns at your request as a separate engagement.

It is your responsibility to provide all the information required for the preparation of complete and accurate returns. You should retain all the documents, canceled checks, and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. *You have the final responsibility* for the income tax returns and, therefore, you should review them carefully before you sign them.

We have made available to you a **questionnaire and summary schedules** requesting specific information. Completing those documents will assist us in making sure you are well served for a reasonable fee. You represent that the information you are supplying to us is accurate and complete to the best of your knowledge and that you have disclosed to us all relevant facts affecting the returns. This will include the ownership of or signature authority over any foreign bank accounts and the ownership of any other foreign financial assets. We will not verify the information you give us; however, we may ask for additional clarification of some information.

In preparing your returns, we rely on your representations that we have been informed of all relevant tax transactions and that you understand and have complied with the documentation requirements for your expenses and deductions. If you have questions about these issues, please contact us.

**Other Work**

If, during our work, we discover information that affects prior-year tax returns, we will make you aware of the facts. However, we cannot be responsible for identifying all items that may affect prior-year returns. If you become aware of such information during the year, please contact us to discuss the best resolution of the issue. We will be happy to prepare appropriate amended returns as a separate engagement.

Our work in connection with the preparation of the tax return(s) does not include any procedures designed to discover defalcations or other irregularities, should any exist. The returns will be prepared solely from information provided to us without verification by us.

The Internal Revenue Code and regulations impose preparation and disclosure standards with non-compliance penalties on both the preparer of a tax return and on the taxpayer. Accordingly, we will discuss tax positions that may increase the risk of exposure to penalties and any recommended disclosures with you before completing the preparation of the return. If we concluded that we are obligated to disclose a position and you refuse to permit the disclosure, we reserve the right to withdraw from the engagement and you agree to compensate us for our services to the date of withdrawal. Our engagement with you will terminate upon our withdrawal.

Headquarters

875 S Main St  
Plymouth  
Michigan 48170  
734.454.4100

Down River

7915 Allen Road  
Allen Park  
Michigan 48101  
313.388.7180

Northern Michigan

P O Box 627  
Grayling  
Michigan 49738  
989.348.4055

Oakland County

2310 E 11 Mile Rd  
Royal Oak  
Michigan 48067  
248.399.7331

**Record Retention and Confidentiality**

In accordance with federal law, in no case will we disclose your tax return information to any location outside the United States, to another tax return preparer outside of our firm for purposes of a second opinion, or to any other third party for any purpose other than in preparing your return without first receiving your consent.

It is our policy to keep records related to this engagement for the minimum Internal Revenue Service statutory requirement. However, we do not keep any of your original records, so we will return those to you upon the completion of the engagement. When records are returned to you, it is your responsibility to retain and protect the records for possible future use, including potential examination by governmental or regulatory agencies.

By signing this engagement letter, you acknowledge and agree that upon the expiration of the minimum Internal Revenue Service statutory requirement, we are free to destroy our records related to this engagement.

Certain communications involving tax advice are privileged and not subject to disclosure to the IRS. By disclosing the contents of those communications to anyone, or by turning over information about those communications to the government, you may be waiving this privilege. To protect this right to privileged communication, please consult with us or your attorney prior to disclosing any information about our tax advice. Should you decide that it is appropriate for us to disclose any potentially privileged communication, you agree to provide us with written, advance authority to make that disclosure. Should we receive any request for the disclosure of privileged information from any third party, including a subpoena or IRS summons, we will notify you. In the event you direct us not to make the disclosure, you agree to hold us harmless from any expenses incurred in defending the privilege.

The return(s) may be selected for review by the taxing authorities. In the event of an audit, you may be requested to produce documents, records, or other evidence to substantiate the items of income and deduction shown on a tax return. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of a tax examination, we will be available, upon request, to represent you. However, such additional services are not included in the fees for the preparation of the tax return(s).

**Payment Terms**

We will bill you our normal and customary fees for the tax preparation services provided. Accordingly, you will save expense if you provide complete, accurate, and organized accounting records. The fee is payable upon completion of the work, and is due before we will provide you with the return. We will notify you immediately of any circumstances we encounter that could significantly affect our normal fees and will not proceed without your consent. All invoices are due and payable upon presentation.

We have the right to withdraw from this engagement, in our discretion, if you don't provide us with any information we request in a timely manner, refuse to cooperate with our reasonable requests or misrepresent any facts. Our withdrawal will release us from any obligation to complete your return and will constitute completion of our engagement. You agree to compensate us for our time and out-of-pocket expenses through the date of our withdrawal.

If the foregoing correctly sets forth your understanding of our tax engagement, please sign this letter in the space below and return it to our office. If you disagree with any of these terms, please notify us immediately.

We want to express our appreciation for this opportunity to work with you.

Respectfully,

*ATS Advisors*

ATS Advisors  
A Certified Public Accounting Firm

AGREED TO AND ACCEPTED:

\_\_\_\_\_  
Taxpayer Signature

\_\_\_\_\_  
Spouse Signature *(if married filing jointly)*

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

Cell Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_



www.atscpas.com

## 2020 Income Tax Preparation Questionnaire & Organizer

Name (include spouse): \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Preferred Ph: \_\_\_\_\_  Cell  Work  Home  Other

Alternate Ph: \_\_\_\_\_  Cell  Work  Home  Other

E-mail: \_\_\_\_\_

Please check box left of contact information to indicate change from prior year

This document is meant as a guide for helping you organize your tax information. It is not intended to replace original documentation. We have modified this organizer from prior years.  
**PLEASE READ IT CAREFULLY AND FILL IN COMPLETELY**

**THIS INFORMATION IS ESSENTIAL TO ENSURE THE PROPER FILING OF YOUR 2020 TAXES**

Stimulus (Economic Impact) Payments		YES	NO
1)	Did you receive the Recovery Rebate Credit IRS Letter (Notice 1444)? <i>*If Yes, please provide a copy of IRS or State notices</i>		
2)	Did you receive the First Stimulus (Economic Impact) Payment? <i>* If Yes, what was the amount of the Payment? \$ _____</i>		
3)	Did you receive the Second Stimulus (Economic Impact) Payment? <i>* If Yes, what was the amount of the Payment? \$ _____</i>		

### General Return & Filing Information

Provide a copy of your current driver's license or government issued ID.

		YES	NO
4)	Were you notified by the IRS or your State of any changes to a prior year's return? <i>*If Yes, please provide a copy of IRS or State notices</i>		
5)	Are you aware of any changes to a prior year's income, deductions, or credits that would require filing an amended return? <i>*If Yes, please explain or attach documentation</i>		
6)	Is the address listed above a NEW primary residence for 2020? <i>*If Yes, please complete question #19</i>		
7)	Did your marital status change in 2020? (Married, Divorced, Remarried) a) <i>If married or remarried, please provide spouse's DOB, SSN &amp; Full Name.</i> b) <i>If divorced, please provide date and copy of decree.</i> <b>New Information:</b> _____		
8)	Any other general information regarding your return filing status? <i>(Additional dependents, new spouse, name change, DOB, SSN, etc.)</i> <b>New Information:</b> _____		
9)	Did you (or spouse) make Estimated <b>FEDERAL TAX</b> Payments for 2020? <i>*If Yes, please provide the following</i>		
	<b>*Remember your January 2020 payment was generally for 2019 and your January 2021 is generally for 2020</b>		
	Date _____ Amount \$ _____		
	Date _____ Amount \$ _____		
	Date _____ Amount \$ _____		

Client Last Name: \_\_\_\_\_

## Dependents

							YES	NO	
10)	<b>Dependents</b> - Indicate if any dependent needs to file a tax return (use additional sheets if needed)								
	ADD OR REMOVE	FIRST NAME	LAST NAME	DOB	RELATIONSHIP	MONTHS IN HOME	DISABLED? F/T STUDENT?		
If claiming a new dependent please provide a copy of their social security card.									
11)	<b>DAY CARE</b> - Did you pay <u>child care costs</u> for a dependent child under the age of 13? <i>*If Yes, include care provider statement with: name, address, federal ID # &amp; amount paid</i>								

## Notes Pertaining to General Return & Filing Information

### Health Care Information

		YES	NO	FORM	QTY
12)	If you purchased your insurance through the <u>MARKETPLACE</u> please provide form(s) <b>1095A</b> . <i>*Contact the marketplace if you did not receive a form and you were insured in 2020</i> <b>(FORM 1095A IS REQUIRED TO COMPLETE YOUR RETURN)</b>			1095A	
13)	Did you (or spouse) make HSA contributions or receive distributions? <i>*Please provide all 1099-SA forms</i>			1099-SA	

### Client notes pertaining to Health Care Information

### Income and Earnings Information (Standard)

		YES	NO	FORM	QTY
14)	Did you (or spouse) receive <u>WAGES</u> as an employee during the year? <i>*Please provide all W-2 forms</i>			W-2	
15)	Did you (or spouse) receive <u>INTEREST</u> from a bank account or other financial institution? <i>(include regular, tax-exempt and bond interest)</i> <i>*Please provide all 1099-INT forms</i>			1099-INT	
16)	Did you (or spouse) receive <u>DIVIDENDS</u> from investments? <i>*Please provide all 1099-DIV forms</i>			1099-DIV	
17)	Did you (or spouse) receive a state or local <u>INCOME TAX REFUND</u> , credit/offset of prior year? <i>*Please provide all 1099-G forms</i>			1099-G	
18)	Did you (or spouse) receive or pay <u>ALIMONY</u> during the year? <i>*If Yes, please provide:</i> Date Divorce Was Finalized _____ Ex-Spouse's Name: _____ Ex-Spouse's SSN: _____ Amount Paid/Received: _____				

	YES	NO	FORM	QTY
19) Did you (or spouse) operate a sole proprietorship, single member LLC or other unincorporated business during the year (Sch C)? <i>*If Yes, please provide detailed income and expense summary for each business</i>			Worksheet available for download at atscpas.com	
20) Did you (or spouse) <b>SELL</b> stocks, securities or mutual funds? <i>*Please provide all 1099-B forms &amp; cost basis info</i>			1099-B	
21) Did you (or spouse) <b>RECEIVE</b> stock from a plan with your employer? <i>*Please provide 1099-B forms</i>			1099-B	
22) Did you (or spouse) <b>SELL/PURCHASE</b> a principal residence, 2 <sup>nd</sup> home, timeshare, cottage, etc.? <i>*If Yes, please provide date and closing documents</i>			Provide copy of Seller/Buyer Settlement Statement	
23) Did you (or spouse) receive payments from a <b>PENSION</b> , IRS, Roth IRA, profit sharing, or other qualified or employer sponsored plan? <i>*Please provide all 1099-R forms</i>			1099-R	
24) Did you (or spouse) purchase, sell or have income from a <b>RENTAL PROPERTY</b> (Sch E)? <i>*If Yes, please provide detailed income and expense summary for each property</i>			Worksheet available for download at atscpas.com	
25) Did you (or spouse) receive <b>UNEMPLOYMENT</b> benefits? <i>*Please provide all 1099-G forms</i>			1099-G	
26) Did you (or spouse) receive <b>SOCIAL SECURITY BENEFITS</b> ? <i>*Please provide all 1099-SSA forms</i>			1099-SSA	
27) Did you (or spouse) have any <b>GAMBLING INCOME</b> during the year? <i>*Please provide all W-2G forms</i>			W-2G	
28) Did you (or spouse) acquire interests in or have income from S-Corporations, Partnerships, or Trusts? <i>*Please provide all K1 Forms 1120S, 1065, or 1041</i>			K-1	

### Income and Earnings Information (Special)

	YES	NO
29) Did you (or spouse) receive income from any of the following:		
a) Gambling winnings not reported on form W-2G?		
b) Other income reported on 1099-Misc Box 3? (*Please provide form)		
c) Qualified tuition program earnings? (Form 1099-Q)		
d) Child's investment income in excess of \$2,100.00?		
e) Jury duty fees?		
f) Cancelled Debts? Form 1099-C or Form 1099-A		
g) Do you have any foreign bank/financial accounts?		
h) Other income? (please provide details)		
i) Did you receive, sell, send, exchange, or otherwise acquire interest in any virtual currency?		

### Client notes pertaining to Income and Earnings Information

## Adjustments to Income & Earnings

		YES	NO
30)	<b>Did you (or spouse) make contributions or rollover funds to any of the following?:</b>		
	a) SEP or Simple IRA contributions (not IRA or Roth)		
	b) Self-employed health insurance premiums?		
	c) IRA or Roth IRA contributions? (not SEP or Simple) Form 5498		
	d) Student loan interest paid? (If Yes, please provide Form(s) 1098-E)		

## Medical Expenses

		YES	NO
31)	Did you (or spouse) pay medical expenses <b>OUT OF POCKET</b> that were neither reimbursed nor paid from a health savings account (HSA)? <i>*Please provide a summary schedule of medical expenses not reimbursed or paid from an HSA</i>		
		Worksheet available for download at <a href="http://atscpas.com">atscpas.com</a>	

## Taxes – State & Local Income, Property and Personal

		YES	NO
32)	Did you (or spouse) make Estimated <b>STATE TAX</b> Payments for 2020? <i>*If Yes, please provide the following:</i>		
	Date _____ Amount \$ _____		
	Date _____ Amount \$ _____		
	Date _____ Amount \$ _____		
	Date _____ Amount \$ _____		
33)	Did you (or spouse) make Estimated <b>LOCAL OR OTHER STATE TAX</b> Payments for 2020? <i>*If Yes, please provide the following:</i>		
	Date _____ Amount \$ _____		
	Date _____ Amount \$ _____		
	Date _____ Amount \$ _____		
	Date _____ Amount \$ _____		
34)	Did you (or spouse) pay <b>REAL ESTATE TAXES</b> on any real property which you own? (Primary residence, 2nd Home, family cottage, timeshare, etc.) <i>*If Yes, please provide all tax bills for taxes you paid or were paid on your behalf</i>		
35)	Did you (or spouse) pay any <b>PERSONAL PROPERTY TAXES</b> based on the value of the personal property? (i.e. plate fees on autos, boats and other vehicles)		
36)	Did you (or spouse) pay any <b>OTHER TAXES</b> you believe may be deductible? <i>*If Yes, please provide details</i>		

## Client notes pertaining to Taxes - State & Local Income, Property and Personal

## Interest – Mortgage & Investment

		YES	NO	FORM	QTY
37)	Did you (or spouse) make payments on a <b>1ST OR 2ND MORTGAGE</b> , refinance or take out a home equity loan? Home equity loans must be used for the purchase of or <b>improvements of the property</b> . <i>*Please provide all 1098 forms</i>			1098	
38)	Did you (or spouse) make payments on a mortgage that was <u>not</u> reported to you on form 1098? (land contract or other)? <i>*If Yes, please provide name, address and TIN of the land contract holder:</i> Name: _____ Address: _____ TIN/SSN: _____				

## Higher Education Expenses

Please note: If you are claiming a deduction or tax credit for higher education expenses paid the 1098-T is REQUIRED for all schools for which you are claiming tuition paid. Additionally, in addition to the 1098-T you must provide proof of payment in the form of a statement from the school or cancelled checks and receipts for payments of tuition and qualified expenses (i.e. books etc.)

		YES	NO	FORM	QTY
39)	Did you pay any <b>HIGHER EDUCATION EXPENSES</b> that were not covered by scholarships or qualified tuition payment plans? <i>If Yes, number of qualified college students _____</i> <i>*Please provide all forms 1098-T, 1099Q and relevant records pertaining to the tuition paid</i>			1098-T	

## Client notes pertaining to Higher Education Expenses

## Charitable Contributions – Cash & Non-cash

		YES	NO	FORM	QTY
40)	Did you (or spouse) make <b>CASH contributions</b> to a qualified charity? <i>*If Yes, please provide receipts or bank records of cash donations</i>			Worksheet available for download at atscpas.com	
41)	Did you (or spouse) make <b>NON-CASH contributions</b> to a qualified charity? <i>*If Yes, please provide receipt and "in good used condition" letter</i> <b>These amounts may not be "estimated" please provide specific detail of items donated!</b>			Worksheet available for download at atscpas.com	
42)	Did you (or spouse) donate a <b>VEHICLE</b> to a qualified charity? <i>*If Yes, please provide statement from charity and form 1098-C</i>			1098-C	

Under tax regulations you acknowledge that you have a letter from the organization or a bank record of the donation reflecting the amount and date of the donation and that any non-cash items were in "good used condition" and that your donation receipt reflects that statement.

## Client notes pertaining to Charitable Contributions – Cash & Non-cash

## Other Deductions & Misc. Expenses

		YES	NO
43)	Do you (or spouse) have expenses from any of the following?:		
	a) <i>Gambling losses exceeding your winnings?</i>		
	b) <i>Other expenses you feel may be deductible?</i>		
44)	<b>Are you are a Renter, please provide (MI Residents Only):</b> <i>Landlord Name &amp; Address _____</i> <i>Number of months you paid rent for 2020 _____</i> <i>Total amount of Rent for 2020 \$ _____</i>		

## Client notes pertaining to Other Deductions & Misc. Expenses

**Direct Deposit of any refund(s)**

		YES	NO
45)	Do you want your refund(s) <b>DIRECT DEPOSITED</b> into your bank account, if any?		
	If yes, <b>attach a voided check or copy of a check</b>		
	<b>PLEASE NOTE: Deposit slips will not be accepted as they have a different routing number than checks</b>		
	<b>Please specify:</b> <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account Bank Name _____ Routing #: _____ Account # _____		

- Due to constant banking changes this information is required every year.
- ATS Advisors will not include prior year banking information.
- If no banking information is provided you will receive a paper check.

**Other information you feel we should be aware of for your 2020 tax preparation**

**If you have any questions, please contact your preferred ATS Advisors office:**

**Headquarters**

875 S Main Street  
 Plymouth, Michigan 48170  
 734.454.4100 – Tel  
 734.454.1300 – Fax

**Northern Michigan**

1155 I-75 Business Loop  
 P O Box 627  
 Grayling, Michigan 49738  
 989.348.4055 – Tel  
 989.348.6451 – Fax

**Down River**

7915 Allen Road  
 Allen Park, Michigan 48101  
 313.388.7180 – Tel  
 313.388.3216 – Fax

**Oakland County**

2310 E Eleven Mile Road  
 Royal Oak, Michigan 48067  
 248.399.7331 – Tel  
 248.414.3848 – Fax

**\*\* PLEASE REMEMBER TO SIGN AND INCLUDE THE ENGAGEMENT LETTER \*\***  
**\*\* AS WE CANNOT e-FILE WITHOUT THE SIGNED LETTER ON FILE \*\***