TAX PREPARATION WORKSHEET
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CHILD CARE PROVIDER INFORMATION
TAX YEAR
2024
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RSR FINANCIAL RESOURCES, INC.
7760 RHYTHM CIRCLE
SPARKS, NEVADA 89436
775-851-7900 775-851-7966 (fax)
EMAIL: rick@rsrfinancial.com
WEB: www.rsrfinancial.com

CHILD CARE PROVIDER INFORMATION NAME - INDIVIDUAL / COMPANY STREET ADDRESS	CITY, STATE ZIP CODE	SOCIAL SECURITY NUMBER	IRS/EIN NUMBER	AMOUNT PAID