LECHMAN & AMBROSE - INFORMATION CHECKLIST

| C | lient: | | |
|--|--------------------------|----------------------------------|---|
| Confirm Date of Birth | Client 1/_ | _/ | Client 2// |
| Name: | (|) | () |
| Drivers License or ID # | (|) | () |
| D/L Date of Issuance | (|) | |
| D/L Date of Expiration | (|) | () |
| Did you move in 2017? | No | Yes | |
| Did you change jobs in 2017? | No | Yes | |
| Did you contribute to an IRA, HSA, or I | ROTH? No | Yes | |
| Did you have Health Insurance i | n 2017? No | Yes | Did you include your 1095-A, B, and/or C? |
| Did you have Health Insurance t | for PART of 201 | 17? Please in | clude dates when covered/not covered by Insurance: |
| stock or funds sold from original | l purchase date t | and basis inform | 1099's detailing income received nation is not provided by the broker, detail all activity in the ale (year-end summary statements are ideal) arately later if everything else is ready, and let us know it's |
| coming) | • | ` 1 | |
| Year-end statement of mortgage | interest (Form | 1098), escrow ac | tivity and balance on mortgage or home equity loans |
| Total of charitable contributions Details include: Name of Charity and Descripti | | tion, FMV of do | |
| If you opened or added to a 529 State: | plan that qualifi Ber | es for a state inc neficiary: | ome tax deduction, please provide details \$: |
| If you have a child in college ple | ease provide all | expenses paid by | both parents and child |
| If you are claiming auto mileage business rental pro | | | byee expenses |
| Type of vehicle | | Date place | d in Service// |
| Personal Miles + Commuting | | | |
| If you bought, sold or refinanced | | | |

Legal documents for divorce, separation decrees, child custody, or purchase or start up of a business

New clients: Copies of prior year federal, state and local returns and depreciation schedules if applicable (at least one year, preferably three years)