INTERVISIONS2, LLC.

CLIENT INFORMATION WORKSHEET

TAX YEAR	DOCUMENT	S RECV: 1095-A	W-2 W2G	MISC 1099_	1099R _	_ MORTGAGE DOC	SSA-1099	
Only IF New Clien	nt 2024 Adjusted g	ross income \$		DA	TE	SOC	IAL	
,	LAST YEAR TAX	RETURN 1040	URN 1040 line 11)		OF BIRTH		SECURITY #	
TAXPAYER								
NAME:								
SPOUSE:								
ADDRESS:		CITY:		STATE: ZIP:				
OCCUPATION:_				APART	MENT #	#:		
CELL PHONE #:		WORK PHONE#;			HOME PHONE#:			
E-MAIL:				_ WEB SIT	E:			
CHECK ONE:		DEPENDENT (S)			SOCIAL		RELATION -	
		NAME		SECUR	ITY#	DATE	SHIP	
Single/Head of l								
Married/Filing		-					_	
Married/Filing	Separate							
Babysitters Name								
Address:								
SS# or FEIN#:								
Amt. Paid in 2024: \$							_	
NEED DOCUMENT F	ROM BABY SITTER	J						
ANSWER ALL Q	UESTIONS, THE	N SIGN YOUR	NAME(S) A	ND DATE:				
YES NO								
	AVE YOU FILED	A TAX RETUR	RN IN THE I	LAST 10 YEA	ARS?			
2. DI	D YOU RECEIVE	E A DISTRIBUT	TION FROM	I YOUR PEN	ISION PI	LAN? (INCLUDE	DOCUMENT)	
	D YOU COLLEC							
							UDE DOCUMENT)	
			,				THS OF THE YEAR?	
	RE YOU OR YOU						:URN?	
	ID YOU RECEIVE O YOU OWE THE						IT I OAN?	
	O YOU HAVE AN				DED L	on brober	I LOMI.	
	VERE YOU EVER				C,ODC O	OR AOTC		
	AVE YOU EVER			,				
12. D	ID YOU RECEIV	E, SELL, SEND	CYRPTO C	CURRENCY	example)	le. Bitcoin)		
13. D	O YOU OWN RE	NTAL PROPER	RTY OR A B	USINESS				
14. D	OID YOU MAKE	IRA CONTRIB	UTIONS FO	R 2024? \$				
(I/We), certify that the	e information that(I/V	Ve) have provided	on this docu	ment front and	back and	d attachments are for	r	
the preparation of	• •			•		_		
(I/We) hold intervs	ions2, LLC. harmle	ess for any mist	akes we may	have made	on or wit	h documention pro	ovided.	
Signature		Sp	oouse:			Date:_		