



The path for a better business and a better life

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AUTOMOBILE INFORMATION

CLIENT NAME: _____

Table with 2 columns and 25 rows. Section 1: AUTOMOBILE (rows 1-15) including Type of vehicle, Date vehicle was placed in service, Cost, Total mileage driven during year, Total business miles, Average daily round trip commuting distance, Miles vehicle was used for commuting, Other personal mileage, Do you (or your spouse) have another vehicle for personal purposes?, Do you have evidence to support your deduction?, If yes, is the evidence written?, Gasoline & Oil, Repairs, Insurance, Other. Section 2: LEASING ONLY (rows 16-19) including Monthly lease payments, Date of lease, Length of lease, Fair market value of vehicle at time of purchase.