

Name:				
DBA / Business Name:				
Business Address:				
Business Activity:				
EIN:				
Type of Business:	Sole Prop	Single Member LLC S	S Corp	
Income				
Sales: \$	Doe	s this amount include sales tax?	Yes	No
Other: \$	Des	cribe:		
<u>Expenses</u>				
Advertising	Building Rent	Wages		
Bad Debts	Equip. Rental	Professional Dues		
Auto	Dues	Business Meals		
Commissions	Subscriptions	Temporary Labor		
Depreciation	Sales Tax	Supplies		
Insurance	Repairs	Cell Phone		
Mortgage Int	Tax/Licenses	Other Expenses and	Amoun	ts
Interest	Travel/Lodging			
Office Expenses	Utilities			
Vehicle Expenses				
Year, Make & Model	Can	ou support the deduction?	Yes	No
Date First Used	Is the	evidence written?	Yes	No
Type of Vehicle	Was	another vehicle available for personal use?	Yes	No
Total Mileage	Was	he vehicle available for use after hours?	Yes	No
Business Mileage	Was	he vehicle leased?	Yes	No
Commuting Mileage	Was	he vehicle used for hire?	Yes	No
Personal Mileage	Actua	Il Expenses (oil, gas, insurance, repairs) _		
Home Office				
Total Square Feet of your home		Security		
Total Square Feet of your office		Condo Maintenance Fee		
Date of Purchase (if 1 st year)		Garbage/Cleaning Services		
Date you began using your home of	office	Repairs, Supplies & Painting _		
Is this used for Day Care?		Water & Sewage		
Rent/Mortgage		Utilities		
Mortgage Interest		Property Insurance		
Property Taxes		Other		
Hours per Week used		Other		

Please Note:

We do not require a current log of your business miles or receipts to file your taxes. However, should a question arise by the IRS, they will require some type of proof. You can use a calendar, planner, receipt, credit card bill, log book, or some other record to verify expenses.

Signature: ____