Taxpayer Name:	
Company Name:	
Tax Year:	
Income Reported on 1099's:	
Other Income Not Included	
Above:	
_	
Expenses -	
Advertising:	
Contract Labor:	
Business Insurance:	
Legal & Professional	
Services:	
Office Expenses:	
Equipment Rent/Lease:	
Repairs & Maintenance:	
Supplies:	
Taxes & Licenses:	
Business Travel:	
Business Meals:	
Utilities:	
Business Telephone:	
Postage:	
Uniforms:	
Website Fees:	
Mileage:	
Vehicle/Equipment:	
Other:	
Other:	
By signing this form, I agree tha	t the above information is correct to the best
	rmation I provided to Freitas Tax Service. I
	am responsible for furnishing the proper
receipts and income reports.	Soboliological contraction of the proper
receipts and income reports.	
Taxpayer Signature:	
Tax Preparer Signature:	
Date:	