



Business Expense Form

Business Name: _____ Business Income \$ _____ Year _____

Do you have employees or contractors? Yes ___ No ___ Do you have inventory? Yes ___ No ___

ADVERTISEMENT

Business Cards/Promotions/Flyers	\$
Networking/Marketing Meetings	\$
Website/Online Marketing	\$

COMPANY FEES

Legal/Professional Fees	\$
Commissions/Fees	\$
Contract Labor	\$
Taxes/Licenses	\$

EMPLOYMENT BENEFIT PROGRAM

Continuing Education/Seminars	\$
Logo Apparel	\$
Other	\$

INSURANCE (Other Than Health)

Health Insurance	\$
Health Savings Accounts	\$
Liability/Workers Comp	\$
Vehicle Insurance	\$

INTEREST

Mortgage	\$
Other	\$

OFFICE

Furniture/Equipment	\$
Rent/Lease	\$
Other Business Property	\$

TRAVEL/ENTERTAINMENT

Flights	\$
Hotels	\$
Meals and Entertainment	\$
Other Expenses	\$

SUPPLIES

Computer Supplies/Software	\$
Office Supplies/Office Tools	\$
Other	\$

VEHICLE

Gas	\$
Repairs/Maintenance	\$
Tolls/Parking	\$
Mileage: Total Miles _____ Business _____	

UTILITIES

Electric/Gas/Water	\$
TV/Internet/Phone	\$

I, (the above mentioned taxpayer/spouse), solemnly swear that the information that was forwarded to the tax preparer is true to the best of my knowledge. In no way am I attempting to file a fraudulent claim by providing the tax preparer with false documentation. I understand that I must have receipts and bank statements on file as proof of the above expenses in the case of an audit.

Signature:

Date:

For more information please contact us anytime at (727)276-2315 or visit us at www.alexander.financial