

Possible Legal Deductions

Client Name: _____

Date: _____

Medical & Dental	
Dr	\$
Dr	\$
Dr	\$
Dr	\$
Dr	\$
Operations	\$
Prescription Drugs	\$
Medical/Dental Insurance	\$
Long-term Care Insurance	\$
Hospital & emergency	\$
Lab & X-Ray	\$
Visiting Nurses/In-home Care	\$
Dental	\$
Dentures & Braces	\$
Glasses & Contact Lenses	\$
Supplies	\$
Hearing Aids & Batteries	\$
Orthopedic Shoes	\$
Therapy Treatments	\$
Canes/Crutches/Braces	\$
Wheelchairs	\$
On Doctor's Advice	\$
Air Conditioning	\$
Vaporizers	\$
Thermometers & Bandages	\$
Other	\$
Medical Miles Driven	\$
Other Medical Transportation	\$

Contributions:	
Church	\$
College	\$
United Way	\$
March of Dimes	\$
CFC	\$
Other	\$
Value of furniture of clothing given to:	\$
	\$
	\$
Volunteer work expenses:	\$
Church, Scouts, School, etc	\$
Auto Miles Driven	\$
Taxes	\$
Real Estate Tax	\$
Personal Property Tax	\$
State Income Tax	\$
	\$
Interest Paid	\$
Home Mortgage Interest	\$
2nd Mortgage/Home Equity	\$
Home Mortgage to Individual Name	\$
Address	\$
Points Paid at Closing	\$
Investment Interest	\$
Casualty Losses:	\$
Accident, Fire, Theft and Natural Disasters	\$

Miscellaneous and Employee Business Expenses	
Uniform Cleaning	\$
Work Tools	\$
Union Dues	\$
Safety Shoes & Gloves	\$
Tax Return Preparation	\$
Safe Deposit Box	\$
Investment Expenses	\$
Education Expenses	\$

Employment/Job Seeking Fees	\$
Sales/Entertainment	\$
Office-in-Home Expenses	\$
Business Travel	\$
Out of Town/Temporary	\$
Vehicle Use (Auto, Truck) Miles	\$
For Work (Non-Commute)	\$
Miles Driven to 2nd Job	\$
Other	\$

Self-Employment Business Expenses	
Advertising	\$
Car & Truck Expenses	\$
Car & Truck Miles Driven	\$
Legal & Professional Services	\$
Other Expenses	\$
Rent or Lease Payments	\$
Utilities/Telephone	\$

Repairs & Maintenance	\$
Supplies	\$
Taxes & Licenses	\$
Travel	\$
Meals	\$
Other	\$

Education Expenses:	
Student Loan Interest	\$
Post-secondary, Tuition & Fees	\$

Provider's SSN/EIN	\$
Amount Paid to Provider	\$

I acknowledge that I must be able to provide proof of the deductions above if needed.
Examples: receipts, statements, mileage log, credit card statements etc.

Signature _____ Date: _____