LONG HAUL TRUCKER/OVERNIGHT DRIVER

Client:	ID#	Tax Year	
The purpose of this worksheet is to help you organi to be deductible, it must be considered an "ordinary expenses. Do not include expenses for which you	ze your tax deductible busine and necessary" expense. Y have been reimbursed, expe	ess expenses. In order for an expense ou may include other applicable ct to be reimbursed, or are reimbursable.	
Out of Town Travel Expenses	Misc	ellaneous Expenses	
Baggage & Shipping		Business Cards & Stationary	
Bath/Shower	Delivery Expen	,	
Car Rental & Gas	Insurance-Busi		
Laundry/Laundry Supplies		sional Services	
Locker Fees		Office Supplies	
Lodging	-	Safety Classes	
Meals (Actual Cost)	Secretarial Ser		
Parking & Tolls			
Taxi, Commuter Bus, Shuttles	Testing-Job Re	erated	
Telephone/Fax			
Tips	Total	Curreline	
Toiletries		Supplies	
Transportation-Air Fare, Bus, Train	Back Supporte	r	
Other	Batteries		
Total	Cellular Phone		
Owner Operator Truck Expenses	Citizens Band I		
Description of Truck	Compass/GPS		
Date Placed in Service	Fire Extinguish	er	
Odometer-Beginning of Year	First Aid Kit		
Odometer-End of Year	Flares		
Interest Paid	Flashlight		
Gas, Lube, Oil	Glasses-Safety	√ & Sun	
Repairs & Maintenance	Gloves		
Tires	Ice Chest/Ther	mos	
Insurance	Map/Map Book		
License/Registration Fee	Radio		
Other	Safety Boots/S	hoes	
Total	Seat Cushion		
Dues & Fees	Tools		
License	Trade Publicati		
Permits/Fees	Uniforms & Ma		
Security Bond	Weather Recei	ver	
Trade Association Dues	Other		
Travel Card Fees	Other		
Union Dues	Other		
Other	Other		
Total	Total		
	ner Information		
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