Florez Tax & Consulting
Prescriptions by the TAXDR

200
TAX YEAR

BUSINESS INCOME AND EXPENSE

NAME/LOCATION _____ **I.D.# (If applicable)** _____

INCOME: DESCRIPTION	$ AMOUNT
Gross Income/Receipts/Commissions received	
Returns/Refunds/Allowances	
Beginning Inventory	
Ending Inventory	
Cost of Goods -- Inventory purchases/materials/labor	
Other income related to this business	
EXPENSES:	
Advertising expense	
Bad debts from sales or services (only if previously included in income)	
Bank service charges	
Car/Truck expense Total miles_____ Business miles_____	
Commissions/Fees/Subcontracts	
Employee benefits-- wages/health/pension/profit sharing plans	
Insurance-- fire/theft/casualty/liability/contents/worker's comp.	
Interest-- paid to banks/S & L's	
Interest-- paid to private parties	
Legal and Professional fees-- attorneys/accountants	
Meals (enter full amount)	
Permits/Licenses	
Postage and freight-- P.O. box rent	
Professional/Technical societies/Education/Seminars-- dues/expenses	
Publications/Books/Periodicals	
Repairs/Maintenance-- carpentry/electrical/plumbing/painting -- cleaning/janitorial	
Rent or Lease-- building/warehouse/vehicles/machinery/equipment	
Security services/ alarms/watchdogs	
Supplies-- office/cleaning/small tools	
Taxes-- real estate/property/payroll/sales	
Travel/entertainment	
Utilities-- electric/water/sewer/gas/telephone	
Other expenses--	
Other expenses--	

MAJOR PURCHASES/ CAPITAL IMPROVEMENTS -- list machinery/furniture/tools/ remodeling/etc.

DATE ACQUIRED	DESCRIPTION	