



**BUSINESS DETAILS**

Name of Business owner:		Social Security Number:	
Business Name:		Business Phone number:	
Cell Phone Carrier:		Email:	
Principal Business or Profession:			
Business NAICS Code:			
Business Address:			
Business Start Date:			
Business EIN (Employer ID Number):			
Tax Filing Year:			
Business Income:			

**BUSINESS ENTITY TYPE:**

- Sole Proprietorship  
  Single Member LLC (SCH C)  
  SCORP (1120S) - attach Articles of Incorporation  
 Partnership LLC (1065) - attach Articles of organization and each members name, address, social security number, email & partners percentage

**BUSINESS EXPENSES:**

				PURCHASED DATE
Advertising	\$	Computer Software	\$	
Car & truck expenses	\$	Computer Peripheral	\$	
Commissions & fees	\$	Furniture	\$	
Business Insurance (other than health)	\$	Fixtures	\$	
Contract labor expense (1099-NEC)	\$	Business Vehicle	\$	
Business Rent Expense	\$	Year:	Make:	Model:
Interest expense	\$	Others	\$	
Officer Salaries & wages	\$	Others	\$	
Employee Salaries (W2)	\$	Others	\$	
Legal & professional services	\$	Others	\$	
Office expense	\$	Others	\$	
Machinery, equipment & other business property	\$	Others	\$	
Repairs	\$	Others	\$	
Supplies	\$	Others	\$	
Taxes & Licenses	\$	Others	\$	
Travel	\$	Others	\$	
Meals & entertainment	\$	Others	\$	
Business Utilities	\$	Others	\$	
Wages	\$	Others	\$	
Miscellaneous	\$	Others	\$	
Other expenses	\$	Others	\$	
Business Phone Expense	\$	Others	\$	
Business uniform	\$	Others	\$	
Business miles		Others	\$	
Commuting miles		Others	\$	
<b>Total Business Expense:</b>	<b>\$</b>			

Signature:		Date:	
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