

Phone: 262.358.8297 Fax: 262.436.2450 kspencer@spenceraccounting.com www.spenceraccounting.com 5935 W. Beloit Rd. West Allis, WI 53219

Business / Schedule C Tax (		For Tax Year(s)	
Profit & Loss Statement for	(Name of Entity)		
Income / Sales	\$	-	
Expenses			
Accounting	\$	Postage	\$
Advertising	\$	_ Printing	\$
Auto & Truck Expense	See Next Page	Rents	\$
Bad Debts	\$	Repairs & Maintenance	\$
Bank Charges	\$	_ Salaries & Wages	Attach W-2s & W-3
Commissions Paid	\$	Security	\$
Salary/Compensation of Officers	\$	Supplies	\$
Delivery & Freight	\$	Taxes	
Depreciation	\$	Payroll Taxes	\$
Dues & Subscriptions	\$	Property Taxes	\$
Employee Benefit Programs	\$	State Taxes	\$
Insurance		Other Taxes	\$
Liability Insurance	\$	Telephone	\$
Self Employed Health Insurance	\$	Equipment/Tools <\$500	\$
Workers Comp. Insurance	\$	Travel	
Other Insurance	\$	Airfare	\$
Interest Expense	\$	Hotel/Lodging	\$
Janitorial	\$	Transportation	\$
Laundry & Cleaning	\$	Uniforms	\$
Legal & Professional	\$	Utilities	\$
Licenses & Permits	\$	Internet Service	\$
Meals & Entertainment	<b>\$</b>	Continuing Education	\$
Miscellaneous	\$	Website Expenses	\$
Office Expenses	\$	Other Expenses	
Outside Services	\$	- · ·	\$
Parking & Tolls	\$		\$
	Assets Purch	ased greater than \$500	
Date Description		Description	Amount
			\$
			\$
			\$
			\$
			\$

Please Enter December 31<sup>st</sup> Cash Balance from Business Bank Account - LLC & Corporations Only:

Cash balance as of 12/31

\$



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Business Tax Checklist Continued The information below has to be co	ompleted in order to d	leduct your automobile expens	ees
Did you dispose of a vehicle used for but If yes, how much did you receive from		Yes vehicle	No \$
Automobile Expense Worksheet	_		
Vehicle 1	Year	Make	Model
Date placed in service Cost of vehicle Total miles driven Jan thru Dec Business miles Jan thru Dec Commuting miles	\$	If NEW- Sales Tax Paid	\$
Is this a leased vehicle?  If yes, total vehicle lease payments	Yes \$	No	
Vehicle 1 - Actual Expenses Gasoline Repairs & Maintenance Car Washes Insurance Vehicle Registration Fee Interest on the Vehicle Loan	\$ \$ \$ \$ \$ \$		
Vehicle 2	Year	Make	Model
Date placed in service Cost of vehicle Total miles driven Jan thru Dec Business miles Jan thru Dec Commuting miles	\$	If NEW- Sales Tax Paid	\$
Is this a leased vehicle?  If yes, total vehicle lease payments	Yes \$	No	
Vehicle 2 - Actual Expenses Gasoline Repairs & Maintenance Car Washes Insurance Vehicle Registration Fee Interest on the Vehicle Loan	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		