**D R TAX SERVICE**

**Tax Payer UBER/LYFT Deduction Information**

**Business Name/DBA:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tax Payer Phone #** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Federal Refund \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owe Federal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**State Refund \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owe State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Information Needed For Tax Preparation**  **\*\*CURRENT COLOR COPY OF DRIVERS LICENSE** | | ***Amount*** | ***Comments*** | |
|  | **Gross Receipts *(1099M, Cash or Checks Received)*** | |  |  | |
|  | **Car Cleanings** | |  |  | |
|  | **Car or Truck ( Mileage Log) from Uber or Lyft** | |  |  | |
|  | **Office Expense** | |  |  | |
|  | **Lease/Rental of Car** | |  |  | |
|  | **Repairs and Maintenance ( Oil Changes, Tire Rotation..etc** | |  |  | |
|  | **Supplies for Clients ( Candy, Chips, Bottle Water/ Soda)** | |  |  | |
|  | **Taxes or License** | |  |  | |
|  | **Meals** | |  |  | |
|  | **GPS Charges** | |  |  | |
|  | **Service Fee Charges** | |  |  | |
|  | **Internet Services** | |  |  | |
|  | **Mobile Phone Services** | |  |  | |
|  | **Tolls Fees/ Parking Fees** | |  |  | |
|  | **Required Protective Clothing** | |  |  | |
|  | **Other** | |  |  | |
|  | **Other** | |  |  | |
|  | **Miscellaneous Fees:** | |  |  | |
|  | **Additional Info or Forms Needed:** | |  |  | |
|  | ***Verify Bank Account Information***  ***Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***Routing#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***Account#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** | ***Would you like fees taken out of refund?***  ***( If yes, please verify Drivers License and provide current copy of driver’s license)***  ***State \_\_\_\_\_ No# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** | | | |
|  | ***Additional Comments or Questions:*** | | | |  |
| ***X*** | | | |
| ***By signing this form you agree that all information submitted is true and accurate to the best of your knowledge and corresponds with verified documents.*** | | | |

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**D R TAX SERVICE**

**Tax Payer Deduction Information**

**Tax Payer Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tax Payer Phone #** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Federal Refund \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owe Federal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**State Refund \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Owe State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Information Needed For Tax Preparation**  **\*\*CURRENT COLOR COPY OF DRIVERS LICENSE** | | ***Amount*** | | ***Comments*** | |
|  | **Medical Insurance** | |  | |  | |
|  | **Medical Mileage** | |  | |  | |
|  | **Medical Bills/Co Payments/Prescriptions** | |  |  |  | |
|  | **Dental Bills/Co Payments** | |  |  |  | |
|  | **Vision Bills/Co Payments** | |  |  |  | |
|  | **Real Estate Taxes/Property Taxes** | |  | |  | |
|  | **Mortgage Insurance Paid** | |  | |  | |
|  | **Mortgage Interest** | |  | |  | |
|  | **House/Hazard Insurance (*eg. AllState, Farmers,CottonState*)** | |  | |  | |
|  | **Home Association Fees** | |  | |  | |
|  | **Last Year’s Tax Prep** | |  | |  | |
|  | **Ad Valorem Taxes/Car Tags** | |  | |  | |
|  | **Emission Fees** | |  | |  | |
|  | **Tithes, Churches & School (Name Of Place)** | |  | |  | |
|  | **Charity Donations (Name Of Place)** | |  | |  | |
|  | **Child Care: 13yrs & Under (Name of Place, Address, EIN)** | |  | |  | |
|  | **Hobbies Expenses /with Hobby Income/Moving Expenses** | |  | |  | |
|  | **Union Dues/Professional Fees** | |  | |  | |
|  | **Employee Gift/Lunch/ Incentives (Out of Pocket)** | |  | |  | |
|  | **Uniforms: (Purchased, Dry-cleaned, Protective Clothing)** | |  | |  | |
|  | **Miscellaneous Fees:** | |  | |  | |
|  | **Additional Forms Needed:**  ***1099G, 1098T, 1095HC or 1098E Student loan Interest*** | |  | |  | |
|  | ***Verify Bank Account Information***  ***Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***Routing#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***Account#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***  ***Bank \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type\_\_\_\_\_\_\_\_\_\_\_*** | ***Would you like fees taken out of refund?***  ***( If yes, please verify Drivers License and provide copy of drivers license)***  ***State \_\_\_\_\_ No# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** | | | | |
|  | ***Additional Comments or Questions:*** | | | | |  |
| ***X*** | | | | |
| ***By signing this form you agree that all information submitted is true and accurate to the best of your knowledge and corresponds with verified documents.*** | | | | |

**For office use only----🡪 TOTAL FEES PAYABLE TO US $\_\_\_\_\_\_\_\_\_\_\_\_**