

Possible Personal Tax Deductions

The following are possible personal deductions that you may qualify to take. For accuracy, we strongly recommend that you consult with Martin's Tax Service before including any of the following information in your final totals for your tax return.

Medical, Dental, Vision, etc.

This section is for any out of pocket expense paid to any physician, for any prescribed medication, medical equipment or procedures.

Doctor	\$ _____	Orthopedic Shoes	\$ _____
Operations	\$ _____	Therapy Treatments	\$ _____
Prescription Drugs	\$ _____	Canes/Crutches/Braces	\$ _____
Medical/ Dental Insurance	\$ _____	Wheelchairs	\$ _____
Long -Term Care	\$ _____	On Doctor's Advice:	
Hospital & Emergency	\$ _____	Air Conditioning	\$ _____
Lab & X-Ray	\$ _____	Vaporizers	\$ _____
Visiting Nurses/ In Home Care	\$ _____	Thermometers/Bandages	\$ _____
Dental	\$ _____	Other	\$ _____
Dentures/Braces	\$ _____	Medical Miles Driven	\$ _____
Glasses/Contacts	\$ _____	Other Medical Transportation	\$ _____
Hearing Aids/ Batteries	\$ _____		

Contributions and Donations

This section is for any donations or tithes and offerings made to any organization.

Church	\$ _____	Colleges	\$ _____
United Way	\$ _____	Goodwill	\$ _____
Value of Items Donations	\$ _____	Other	\$ _____
Volunteer Work Expenses (Church, Scouts, Schools, etc.)	\$ _____		



Casualty Losses

This section is for any casualty losses you incurred in the current filing year.

Accident, Fire, Theft and Natural Disasters \$ _____

Taxes

This section is for any taxes that you had to pay for the following.

Real Estate Tax \$ _____
 Personal Property Tax \$ _____
 State Income Tax \$ _____

Interest Paid

This section is for the interest you had to pay for the following:

Home Mortgage Interest \$ _____
 2nd Mortgage / Home Equity \$ _____
 Points Paid at Closing \$ _____
 Investment Interest \$ _____

Miscellaneous and Employee Business Expenses

Guidelines concerning the following have changed in recent years. We strongly recommend that you consult with Martin's Tax Service before including these amounts in your final tax return totals.

Uniform Cleaning	\$ _____	Employment / Job Seeking Fees	\$ _____
Work Tools	\$ _____	Sales / Entertainment	\$ _____
Union Dues	\$ _____	Business Travel	\$ _____
Safety Shoes & Gloves	\$ _____	Out of Town / Temporary	\$ _____
Tax Return Preparation	\$ _____	Vehicle Use Miles	\$ _____
Safe Deposit Box	\$ _____		

Office in home - Sq. Ft. Used for Business: _____ Total Sq. Ft. of Home: _____

We will prepare your tax return from the information you've furnished. Upon examination, taxing authorities may request copies of supporting documents, therefore preserve all records for which you may be called upon to produce. I certify that the information on this and any other form submitted is complete and correct.

Signature: _____ **Date:** _____