Expenses Related to Business SSN: Name: **Auto Expense** Name of business vehicle is used for _____ Description of vehicle Date vehicle was placed in service Yes Nο Yes Nο This vehicle is available for use during off-duty hours There is evidence to support your deduction Another vehicle is available for personal use The evidence is written Mileage Number of miles the vehicle was driven during 2019 **Expenses** Repairs Oil · · · · · · · · Other expenses Rental fees **Business Use of Home** Name of business home is used for What is the total square footage of your home that was used regularly and exclusively for business What is the total square footage of your home For daycare facilities not used exclusively for business, complete the following questions How many days during the year was the area used How many hours per day was the area used The daycare facility was in operation for the entire year **Expenses** Office expenses Home expenses In the "Office expenses" column. Mortgage interest enter those expenses that Real estate taxes pertain exclusively to your office; Excess mortgage interest in the "Home expenses" column, enter those expenses that Excess real estate taxes pertain to the entire dwelling. Insurance