

INCOME	AMOUNT	If you sent in estimated tax payments, please bring in your cancelled checks.	
W-2'S		DEDUCTIONS	
W-2P's (Pensions)		MEDICAL EXPENSES	AMOUNT
IRA Distribution, 1099-R		Hospital & Medical Insurance Premiums	
Interest Earned			
Banks		Prescription Drugs	
Cancellation of Debt (1099-C)		Other Medicines (for specific illness)	
Credit Unions		Doctor	
Savings Bonds		Doctor	
Insurance		Nursing Care	
Gambling Winnings (W2-G)		Hospital	
Other Interest		Dentist	
Dividends			
Unemployment		Travel for Medical Purpose/Miles	
Social Security		Parking Fees/Medical Purpose	
OTHER INCOME		Taxi Bus Plane	
Include Escrow papers if property bought or sold		Ambulance	
ADJUSTMENTS TO INCOME		Phone Calls to Doctor/Hospital/etc. (Toll Charges)	
IRA Contributions		Medical Equipment	
Roth, Regular, Converted		Prosthetic Devices	
Amounts		Lab & x-ray (not included w/doctor and hospital)	
TAXES PAID		Glasses	
Real Estate (home)		Hearing Aids Batteries	
Other Real Estate		Special Therapy	
Estimates Paid		Insurance Reimbursement	
INTEREST PAID		CONTRIBUTIONS	
If paid to an individual must have name, address and social security number		RECEIPTS REQUIRED FOR ALL DONATIONS	
Home Mortgage		Cash Value of Goods	
2ND Mortgage		Church	
2nd Home		Salvation Army	
Other (secured by homes)		Goodwill	
Investment Interest		Red Cross/YMCA	
CHILD & DEPENDENT CARE		United Fund	
Name, Social Security Number and Date of Birth of Children/Dependents		Payroll Deduction	
		Cancer / Heart	
Person Paid to (name, address & relationship); to and from date; amount paid		Others	
Service performed in your home? Yes No			
Need Social Security Numbers for All Child Care Providers and Receipts for Payments		Expenses in connection with a charitable organization, explain: Travel for charitable work: Miles	
		Value is lesser of fair market value or cost. If total of column is \$500 or more an itemized list is required.	