

AUTO EXPENSE WORKSHEET

PLEASE FILL OUT ONE SHEET PER VEHICLE

TYPE OF VEHICLE: MAKE/MODEL/YEAR _____

MONTH/YEAR FIRST USED FOR BUSINESS: _____ PURCHASE PRICE \$ _____

MILEAGE AND EXPENSES	
TOTAL MILES DRIVEN	
BUSINESS MILES	
COMMUTING MILES	
PERSONAL MILES	
PARKING FEES	\$
TOLLS	\$

PLEASE ANSWER YES OR NO TO ALL QUESTIONS	YES	NO
DO YOU HAVE ANOTHER VEHICLE AVAILABLE FOR PERSONAL USE?	<input type="checkbox"/>	<input type="checkbox"/>
WAS YOUR VEHICLE AVAILABLE FOR USE DURING OFF DUTY HOURS?	<input type="checkbox"/>	<input type="checkbox"/>
DO YOU HAVE EVIDENCE TO SUPPORT YOUR DEDUCTION?	<input type="checkbox"/>	<input type="checkbox"/>
IF "YES" IS THE EVIDENCE WRITTEN?	<input type="checkbox"/>	<input type="checkbox"/>

COMPLETE THE SECTION BELOW ONLY IF YOU ARE CLAIMING ACTUAL EXPENSES INSTEAD OF THE MILEAGE RATE

ACTUAL EXPENSES—TOTAL FOR THE YEAR	
FUEL	\$
AUTO INSURANCE	\$
CAR LICENSE AND REGISTRATION	\$
OIL CHANGES	\$
REPAIRS AND MAINTENANCE	\$
TIRES	\$
LEASE PAYMENTS	\$
AUTO CLUB	\$
NEW VEHICLE PROPERTY OR EXCISE TAX	\$
OTHER EXPENSES	\$
	\$
	\$