Name NEW CLIENT SSN XXX-XX-XXXX

Business _____ Copy _____

Self-Employed Office in Home Expenses

			Current Year Amount	Prior Year Amount
Area of Home				
1	Area used regularly and exclusively for business, regularly for daycare.	1		
2	Total area of home	2		
Daycare only				
3	Multiply days used for daycare during year by hours used per day	3		
Expenses related to entire home including business portion				
4	Casualty losses	4		
5	Excess mortgage interest	5		
6	Insurance	6		
7	Rent	7		
8	Repairs and maintenance	8		
9	Utilities	9		
10	Other expenses	10		
Additional expenses related to business portion only				
11	Casualty losses	11		
12	Excess mortgage interest	12		
13	Insurance	13		
14	Rent	14		
15	Repairs and maintenance	15		
16	Utilities	16		
17	Other expenses	17		

R ALLAN RAINEY PC