

CAROLYN'S TAX SERVICE

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CAROLYN CHALIFOUX, Tax Consultant

MEDICAL EXPENSES

Amount

Prescription Drugs \$ _____
Doctors, Dentists, Nurses _____
Hospitals _____
Medical Supplies _____
Glasses _____
Ambulance _____
Insurance Premiums Paid
for Medical & Dental Care _____
Medical Miles _____

CONTRIBUTIONS

Church \$ _____
Cancer Fund, Red Cross, others _____
Payroll Donations _____
Fair Market Value of
Materials Donated _____

CHILD CARE

Amount Paid \$ _____
Name of Babysitter _____
Address of Babysitter _____
Social Security # of Babysitter _____
Nursery School _____

TAXES

Amount

Real Estate Taxes \$ _____
Personal Property
(swimming pool, boat, horses) _____
Excise Tax on Auto _____

INTEREST PAID

Home Mortgage \$ _____
Equity Loans _____
Student Loan Interest _____

MISCELLANEOUS

Union Dues \$ _____
Association Dues _____
Safety Deposit Box _____
Uniforms _____
Safety Shoes _____
Safety Equipment _____
Tax Preparation _____
Tools on Job _____
Supplies on Job _____

HOME OFFICE EXPENSE

To be deductible, it must be for the convenience of the **EMPLOYER**.

If dropping your return off - inquire at front desk about Home Office Deductions.

IRA DEDUCTION

Amount

Taxpayer \$ _____
Spouse _____

ESTIMATED TAX PAYMENTS

	1st	2nd	3rd	4th
Federal	\$ _____	\$ _____	\$ _____	\$ _____
State	_____	_____	_____	_____

RENT PAID

Taxpayer Address _____
Number of Months _____
Amount per Month \$ _____
Landlord's Name & Address _____

Taxpayer Address _____
Number of Months _____
Amount per Month \$ _____
Landlord's Name & Address _____

INTEREST and DIVIDEND INCOME

Please bring in Year End Statements

TUITION PAID FOR TAXPAYER or SPOUSE or DEPENDENTS PURSUING COLLEGE DEGREE