



personal touch tax & financial consultants

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ITEMIZED DEDUCTION WORKSHEET

IF THERE ARE ANY QUESTIONS PLEASE FEEL FREE TO CALL US FOR ASSISTANCE.
REMEMBER TO ROUND TO THE NEAREST WHOLE DOLLAR.

NAME _____ YEAR _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

TAX YEAR _____

EXPENSES

_____ UNREIMBURSED MEDICAL EXPENSES

_____ DOCTORS, DENTISTS, CHIROPRACTIC, OR EYE

_____ PRESCRIPTIONS

_____ MILEAGE FOR MEDICAL APPOINTMENTS

_____ SELF EMPLOYED HEALTH INSURANCE

_____ REAL ESTATE TAXES

_____ VEHICLE EXCISE TAX (AD VALOREM)

_____ ANY OTHER PERSONAL PROPERTY TAX (BOATS, TRAILERS, OR MOTOR HOMES)

_____ HOME MORTGAGE INTEREST PAID (1ST & 2ND OR EQUITY LINE OF CREDIT)

IF PAID TO ANY INDIVIDUAL: NAME, ADDRESS & SOCIAL SECURITY NUMBER OF RECIPIENT.

_____ CHARITABLE CONTRIBUTIONS

_____ CASH

_____ NON-CASH (CLICK HERE FOR NON-CASH PRICE GUIDELINE)

_____ UNREIMBURSED JOB EXPENSES (IE. JOB TRAVEL, UNION DUES, JOB EDUCATION ETC.)

_____ TAX PREPARATIONS FEES

_____ MISCELLANEOUS (LIST AND DESCRIBE)



TAX PREP



TAX PLANNING



CONSULTING



RECORD KEEPING



PAYROLL



TRAINING



REPRESENTATION



SCAN & ARCHIVE