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## Corporate Business Income & Expenses

Business Name	Federal ID	
	MN ID	
Address	Date Incorporated	
	Notice of Acceptance Date of S-Corp.	
Contact Person	Telephone	
Please provide the following information	n in order to complete your Business Tax Return	
Shareholder information		
Name	Social Security No	
Address	% of ownership	
Shareholder information		
Name	Social Security No	
Address	% of ownership	
Shareholder information		
Name	Social Security No	
Address	% of ownership	
NOTES OR COMMENTS		

Company Name		Tax Year	
INCOME		INVENTORY	
Gross Sales	\$	Beginning Balance	\$
Other Income	\$	Purchases	\$
Returns & credits against Sales	\$	Ending Balance	\$
EXPENSES			
Advertising	\$	Office Expense	\$
Auto & Truck *see note below	\$	Independent Contractors	\$
Bad Debt	\$	Parking fees and tolls	\$
Bank Charges	\$	Payroll Wages	\$
Cleaning	\$	Payroll Wages Officer	\$
Commissions	\$	Permits & Fees	\$
Computer Service and supplies	\$	Postage	\$
Delivery & Freight	\$	Printing	\$
Discounts	\$	Rents	\$
Dues & Subcriptions	\$	Repairs & Maintenance	\$
Equipment Rental	\$	Security	\$
Furniture & Equipment (List below)	\$	Supplies	\$
Gifts	\$	Taxes	\$
Insurance	\$	Telephone	\$
Interest	\$	Tools (small)	\$
Janitorial	\$	Training/Cont. education	\$
Laundry & Cleaning	\$	Travel	\$
Legal & Professional Fees	\$	Uniforms	\$
Licenses	\$	Utilities	\$
Meals & Entertainment	\$		\$
Other (please list)			\$
	\$		\$
	\$		\$
Furniture & Equipment Description of item	Date of Purchase	Cost \$	
		<u>\$</u> \$	
	<u> </u>	\$ \$	
*Auto & Truck -Year/Make/Model	Business Miles	Personal Miles	Total Miles
		#	#
		#	#