ITEMIZED DEDUCTIONS

CALIFORNIA TAX SERVICE

202 East Airport Dr., Ste 155 San Bernardino, CA 92408 Tel: (909) 884-1313 Fax: (909) 884-5351

MEDICAL EXPENSES	AMOUNT*
Insurance	
Long Term Care	
Doctors & Dentists	
Hospitals, Nursing Homes, Etc.	
Labs & X-Rays	
Prescriptions Drugs	
Glasses, Hearing Aids	
Medical Travel	Miles
Medical Lodging	
Other Medical:	

TAXES	AMOUNT*
Real Estate Tax	
Auto License Fees	
Personal Property Tax	
State Income Tax (Calculated by CTS)	
Other Taxes:	

MORTGAGE INTEREST	AMOUNT*
1st Mortgage	
2 nd Mortgage	
Home Equity Loan	
If you have refinanced or purchased your home last year, ple	ease bring your

EDUCATION EXPENSES	AMOUNT*
Tuition	
Books & Supplies	
Parking	

Tuttion	
Books & Supplies	
Parking	
Mileage	Miles
Student Loan Interest	
Other Education:	

CASH CONTRIBUTIONS	AMOUNT*
Church/Temple	
Payroll Deduction	
Miscellaneous Cash	
Charitable Travel	Miles
Other Cash Contributions:	

Non-Cash Contributions	QTY	VALUE (FMV**)
Clothing (No. Bags)		
Appliances		
Furniture		
Toys		
Electronics		
Food		
Miscellaneous		

EMPLOYEE BUSINESS EXPENSES	SELF	SPOUSE
Business Miles (Non-Commute)	Miles	Miles
Communications		
Job Search		
Job Supplies		
Job Toll Calls & 2nd Phone		
Licenses		
Professional Subscriptions		
Safety Boots & Equipment		
Teaching Aids & Supplies		
Uniforms - Laundry		
Uniforms - Purchased		
Union & Professional Dues		
Work Tools		

MISCELLANEOUS EXPENSES	AMOUNT*
Safe Deposit Box	
Tax Return Preparation Fee	

DAY CARE EXPENSES (CHILD & DEPENDENTS UNDER 14)			
Provider Name & Telephone	Full Address	SSN# or Tax ID #	Amt Pd Last Yr*
Provider Social Security or Tax ID Number REQUIRED.			

DIVIDEND INCOME	AMOUNT*

INTEREST INCOME	Amount*

Notes:			

escrow papers.