

## Auto Expense Worksheet

Name: \_\_\_\_\_

SSN: \_\_\_\_\_

### General Information

For \_\_\_\_\_

Business name and profession/product \_\_\_\_\_

Description \_\_\_\_\_

Date placed in service \_\_\_\_\_

Was this vehicle available for use during off-duty hours?  Yes  No

Do you or your spouse have another vehicle available for personal use?  Yes  No

Do you have evidence to support your deduction?  Yes  No

If "Yes," is the evidence written?  Yes  No

Enter the number of miles your vehicle was used for:

2022

2021

Prior year total

Business	Before July 1, 2022	_____	_____	Business	_____
	After June 30, 2022	_____	_____		Total
Commuting	_____	_____	_____		
Other	_____	_____	_____		

### Expenses

2022

2021

Garage rent	_____	_____
Gas	_____	_____
Insurance	_____	_____
Licenses	_____	_____
Oil	_____	_____
Parking fees	_____	_____
Rental fees	_____	_____
Interest	_____	_____
Property tax	_____	_____
Repairs	_____	_____
Tires	_____	_____
Tolls	_____	_____
Lease addbacks	_____	_____
Other expenses (list):	Apply business %	
_____	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	_____