

# SCHEDULE C DUE DILIGENCE



Taxpayer Name

Business Name (if any)

Business Address

Date Business Started

Business EIN

Total Sales & Services

1099 Income

Advertising

Repairs

Auto Expenses

Supplies

Commissions

Taxes & Licenses

Depletion

Travel

Mortgage Interest

Meals

Rent (Vehicles)

Utilities

Rent (Machinery)

Legal/Professionals

Office Expenses

Other:

Total Expenses

If you do not have any business expenses, please explain why?

Taxpayer has provided all answers to the above questions to be true and correct to the best of the taxpayer's knowledge.

Signature

Date Signed :  D  D  M  M  Y  Y

Signature

Date Signed :  D  D  M  M  Y  Y