

SELF EMPLOYED INDIVIDUALS ONLY

Name _____ Year _____

A. What is your occupation or business? _____

B. How much was your total Income for a year? _____

C. Did you used your vehicle to operate this business? Yes _ No_

- Make of vehicle: _____

- Model of vehicle: _____

- What is the date you started using your vehicle for this business? _____

- What is the total mileage for the year? _____

- How much mileage was for:

Business: _____ Personal: _____ other: _____

- Tolls \$ _____ and Parking \$ _____ (Business only)

a. List all your expenses with the amount use for this business only or provide attachment.

1) _____ \$ _____

2) _____ \$ _____

3) _____ \$ _____

4) _____ \$ _____

5) _____ \$ _____