

Tax Organizer—Long Haul Truckers and Overnight Drivers

Name: _____ Tax Year: _____

Principal Business: _____

Business Name and Address: _____

Date Business Started (if started this year): _____

PART 1—Out-of-Town Travel Expenses

Baggage and Shipping	
Bath and Shower Costs	
Car Rental and Gas	
Laundry and Laundry Supplies	
Locker Fees	
Lodging	
Meals (Actual Cost)	
Parking and Tolls	
Telephone	
Tips	
Toiletries	
Transportation—Airfare, Bus and Train	
Truck Stop Electrification	
Other: _____	

PART 2—Owner/Operator Truck Expenses

Description of Truck	
Date Placed in Service	
Odometer—Beginning of Year	
Odometer—End of Year	
Vehicle Weight	
Interest Paid	
Gas, Lube and Oil	
Repairs and Maintenance	
Tires	
Insurance	
License and Registration Fees	
Other: _____	

PART 3—Dues and Fees

License	
Permits and Fees	
Security Bond	
Trade Association Dues	
Travel Card Fees	
Union Dues	
Other: _____	

PART 4—Miscellaneous Expenses

Business Cards and Stationary	
Delivery Expenses—Postage	
Insurance—Business	
Legal and Professional Services	
Office Supplies	
Safety Classes	
Secretarial Services	
Testing—Job Related	
Other: _____	
Other: _____	
Other: _____	

PART 5—Supplies

Back Supporter	
Batteries	
Cellular Phone	
Citizens Band Radio	
Compass/GPS	
Fire Extinguisher	
First Aid Kit	
Flares	
Flashlight	
Glasses—Safety and Sun	
Gloves	
Ice Chest/Thermos	
Map/Map Book	
Radio	
Safety Boots/Shoes	
Seat Cushion	
Tools	
Trade Publications	
Uniforms and Maintenance	
Weather Receiver	
Other: _____	
Other: _____	
Other: _____	