

Name \_\_\_\_\_

SS# \_\_\_\_\_

## CAMERA ASST / LIGHTING DESIGN / TECH WORKSHEET

|  |                          |
|--|--------------------------|
| <b>ADVERTISING-</b> bus. cards, publicity photos, resumés          |                          |
| <b>PROFESSIONAL SERVICES-</b> subcontract labor, assistants        |                          |
| <b>INTEREST-</b> paid on business expenses                         |                          |
| <b>FEES-</b> legal and accounting fees                             |                          |
| <b>POSTAGE-</b> fax, Xerox, FedEx, messengers                      |                          |
| <b>EQUIPMENT RENTAL-</b> film production expense                   |                          |
| <b>REPAIRS-</b> computer and equipment repair                      |                          |
| <b>SUPPLIES -</b> stationery, batteries, etc.                      |                          |
| <b>KIT PURCHASE-</b> tools   |                          |
| <b>TRAVEL-</b> airfare, hotels, cabs                               |                          |
| <b>MEALS &amp; ENTERTAINMENT-</b> business meals, food on location |                          |
| <b>PHONE-</b> used for business, answering service, cell, v-mail   |                          |
| <b>TRADE PUBLICATIONS-</b> industry mags, books                    |                          |
| <b>SEMINARS-</b> trade shows                                       |                          |
| <b>GIFTS-</b> promotional, client                                  |                          |
| <b>FILM-</b> film processing                                       |                          |
| <b>TAPE DUPLICATION-</b> demo reel                                 |                          |
| <b>RESEARCH-</b> films, concerts, video rentals                    |                          |
| <b>CABLE TV</b>  |                          |
| <b>IN-HOME STUDIO-</b> %of sqft used as studio                     |                          |
| <b>UTILITIES</b> electric, gas                                     |                          |
| <b>DUES &amp; FEES-</b> union fees, online fees                    |                          |
| <b>PARKING</b>   |                          |
| <b>LOCATION -</b> number of days on location                       |                          |
| <b>MEDICAL -</b> doctor, dentist, optometry                        | <b>MEDICAL INSURANCE</b> |
| <b>MORTGAGE INTEREST</b>   |                          |
| <b>REAL ESTATE TAX</b>   |                          |
| <b>CHARITY -</b> cash, check                                       |                          |
| <b>CHARITY -</b> other   |                          |

| <b>VEHICLE EXPENSE:</b>   | <b>VEHICLE 1</b> | <b>VEHICLE 2</b> |
|---------------------------|------------------|------------------|
| Year vehicle was acquired |                  |                  |
| Total Miles               |                  |                  |
| Business Miles            |                  |                  |
| Approx. miles per gallon  |                  |                  |
| Cost of insurance         |                  |                  |
| Repairs, tires, tune-ups  |                  |                  |
| Lease expense             |                  |                  |
| Vehicle Registration/DMV  |                  |                  |

**BUSINESS EQUIPMENT PURCHASED DURING THE YEAR:**

| Date Purchased | Description | Cost |
|----------------|-------------|------|
|                |             |      |
|                |             |      |
|                |             |      |
|                |             |      |
|                |             |      |
|                |             |      |
|                |             |      |
|                |             |      |

**CHECK LIST:**

- Make sure all names are exactly as they appear on the social security cards.
- Subtotal all your receipts and write them in under the appropriate categories.
- Bring all W-2s and 1099s with you.
- If you sold any stocks, bring in all information, including date and price of purchase and sale.
- Make sure Social Security numbers are included for all children (dependents).
- Fill out the following:

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: home \_\_\_\_\_ work \_\_\_\_\_ cell \_\_\_\_\_

email: \_\_\_\_\_

prepared by:

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FOR OFFICE USE ONLY:

ESTIMATED FED REFUND \$ \_\_\_\_\_ ESTIMATED STATE REFUND \$ \_\_\_\_\_