

# Report of Unincurred Business Expenses – items received at no cost:

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Personal information:

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

Social Security Number: \_\_\_\_\_

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

Phone: \_\_\_\_\_

I am self-employed as a: \_\_\_\_\_

<b>ITEMS RECEIVED FROM OTHERS</b>
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<u>Date Received</u>	<u>Item</u>	<u>Provided by</u>	<u>Their relationship to me</u>	<u>Value of item</u>
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____

These items were provided to me by others because: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

# Report of Unincurred Business Expenses – service provided by others:

Personal information:

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

Social Security Number: \_\_\_\_\_

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

Phone: \_\_\_\_\_

I am self-employed as a: \_\_\_\_\_

## SERVICE PROVIDED BY OTHERS

Service provided: \_\_\_\_\_

Provided by: \_\_\_\_\_

*(Name of person providing assistance and their relationship to me)*

Hourly value of the donated service		Number of hours the service is provided per month		Monthly value of services donated
\$ _____	X	_____	=	\$ _____

These services are donated to me because: \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*