**UNREIMBURSED EMPLOYMENT EXPENSES WORKSHEET**

**TAXPAYER NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TAX YEAR:\_\_\_\_\_\_\_\_**

**VEHICLE EXPENSES \*USE VEHICLE WORKSHEET\***

**TANSPORTATION (PARKING FEES, TOLLS, RENTAL CAR, ETC.) \*NOT FOR OVERNIGHT TRIPS \_\_\_\_\_\_\_\_\_\_\_\_**

**OVERNIGHT TRAVEL EXPENSE \*NOT INCLUDING MEALS \_\_\_\_\_\_\_\_\_\_\_\_**

**TOTAL MEALS \_\_\_\_\_\_\_\_\_\_**

**TOTAL REIMBURSMENTS \_\_\_\_\_\_\_\_\_\_**

**QUALIFIED EDUCATOR EXPENSE \_\_\_\_\_\_\_\_\_\_**

**UNION AND PROFESSIONAL DUES \_\_\_\_\_\_\_\_\_\_**

**UNIFORMS AND PROTECTIVE CLOTHING \_\_\_\_\_\_\_\_\_\_**

**JOB SEARCH COSTS \_\_\_\_\_\_\_\_\_\_**

**SMALL TOOLS \_\_\_\_\_\_\_\_\_\_**

**CELL PHONE \*IF REQUIRED BY EMPLOYER \_\_\_\_\_\_\_\_\_\_**

**HOME OFFICE:**

**SQUARE FOOTAGE OF WHOLE HOUSE \_\_\_\_\_\_\_\_\_\_**

**SQUARE FOOTAGE OF OFFICE SPACE \_\_\_\_\_\_\_\_\_\_**