

HAIR / NAIL STYLIST

****Please Give Totals****
Save Receipts



Revenue

TOTAL INCOME (1099 INCOME)
 RETURNS / ALLOWANCES (Re- Do's)

Cost of Goods Sold

SUPPLIES (HAIR / NAIL PRODUCTS - Equipment)

Expenses

| | | |
|------------------------------------|--------------------------------|--|
| ADVERTISING | (client gift, donations) | |
| COMMISSIONS / FEES | (Credit/Bank fees, Membership) | |
| CONTRACT LABOR | (HIRE OUTSIDE HELP) | |
| INSURANCE (NOT health) | | |
| INTEREST - MORTGAGE | (MORTGAGE FOR BUSINESS) | |
| INTEREST - OTHER | (CREDIT CARD/LOANS) | |
| LEGAL/PRO SERVICE | (laundry/dry cleaning) | |
| OFFICE EXPENSE | (towels, client refreshments) | |
| RENT- STUDIO / BOOTH | | |
| RENT - VEHICLE / EQUIP. | | |
| REPAIRS & MAINTENANCE | (Shop or equipment) | |
| TAXES / LICENSE | (SALES, OCCUPATIONAL) | |
| TRAVEL | (HOTEL STAY/FLIGHT) | |
| MEALS | | |
| UTILITIES - Electric, Water, Trash | | |
| CELL PHONE | | |
| INTERNET | | |
| OTHER EXPENSE | | |
| BOOKS, REF. MATERIAL SOFTWARE | | |
| UNIFORM / SAFETY WEAR | | |
| CONTINUE EDUCATION | | |
| MILEAGE | (NOT CLAIMING FUEL/REPAIR) | |
| FUEL | | |
| REPAIRS/MAINTENANCE | (ONLY IF CLAIMING FUEL) | |
| TYPE EQUIP. PURCHASE | DATE & COST | |
| _____ | _____ | |
| _____ | _____ | |
| _____ | _____ | |
| _____ | _____ | |
| _____ | _____ | |

DID YOU ISSUE A 1099 TO ANYONE? YES OR NO
BUSINESS NAME _____
 STATE ESTABLISHED _____ DATE ESTABLISHED _____

Do you need Occupational License? **LLC, PARTNER, S-CORP, INC.?**
 County? _____ EIN # _____
 City? _____ Org# _____ LLET# _____