

LOVE AND ASSOCIATES, INC.  
HAIRSTYLIST EXPENSE

Client Name \_\_\_\_\_  
Tax Year \_\_\_\_\_

Operating Expense			Education Expense		
Advertising			Seminar Expenses		
Accounting Fees			Continued Education		
Business Cards			Books, Tapes		
Bank Charges			Other _____		
Clerical Expense			Other _____		
Client Gifts			<b>TOTAL</b>		
Professional Expenses			Communication		
Dues			Cellular Phone		
E&O Insurance			Faxes		
Legal Fees			Pagers		
License Expense			Answering Service		
Memberships			Other _____		
Publications			Other _____		
Other _____			<b>TOTAL</b>		
Other _____			<b>Equipment</b>		
<b>TOTAL</b>			Calculators		
			Desk		
			Camera/Video Recorder		
			Chairs		
			Filing Cabinet		
			Cellular Phone		
			Tape Recorder		
			Telephone Equipment		
			Fax Machine		
			Computer/Printer		
			Scanner		
			Office Decorations		
			Other _____		
			Other _____		
			<b>TOTAL</b>		
Professional Expenses			Other Expense		
Dues			Other _____		
E&O Insurance			Other _____		
Legal Fees			Other _____		
License Expense			Other _____		
Memberships			Other _____		
Publications			Other _____		
Other _____			<b>TOTAL</b>		
Other _____					
<b>TOTAL</b>					

Notes/Comments \_\_\_\_\_  
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