Foothills
INCOME TAX SERVICE

P. O. Box 431, New Hartford, CT 06057
Phone: (860) 738-1040
Fax (844) 977-1040

## ITEMIZED DEDUCTION INFORMATION

| TAXPAYER(S) NAME(S): |
|---|

### MEDICAL EXPENSE DEDUCTIONS

| | | |
|---|---|---|
| Prescription Medications (out-of-pocket): | | |
| Doctors, Dentists, Nurses & Hospitals (out-of-pocket): | | |
| Medical Insurance Premiums (not life): | | |
| Auto Expenses: | Mileage: | Parking/Tolls: |
| Hearing Aid Batteries, Glasses, etc: | | |
| Other (describe): | | |

### TAXES PAID

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| State Income Taxes: |
| State Sales tax on auto purchases this year: |
| City or Town Real Estate Taxes Paid on home: |
| City or Town Vehicle Taxes: |
| City or town real estate taxes paid on a home other than your residence: |
| Other (describe): |

### INTEREST PAID

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| Interest on first mortgage: |
| Interest on second mortgage: |
| Interest paid on home equity loan: |
| Points paid on mortgage: |
| Other (describe): |

(NOTE: personal loans, car loans and credit card interest are no longer deductible)

### CONTRIBUTIONS

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| Cash donations made to church or charity: |
| Contributions other than cash (furniture, clothing, other property): |
| Other: |

### OTHER DEDUCTIONS

| | |
|---|---|
| Gambling losses if you had reportable winnings: | |
| Other: | Description: |

**NEW CLIENTS PLEASE BRING A COPY OF PREVIOUS YEAR'S TAX RETURN**