

**PERFORMING ARTISTS
OUT OF TOWN EXPENSES**

Client: _____

SSN #: _____

Tax Year: _____

Tax payer is a freelance performing artist who was engaged in and/or sought theatrical employment with the following organizations:

EMPLOYER AND ADDRESS	DATES	# OF DAYS
(A)	-	
(B)	-	
(C)	-	
(D)	-	
(E)	-	
(F)	-	

EXPENSE	AMOUNT BY EMPLOYER					
	(A)	(B)	(C)	(D)	(E)	(F)
Travel to and from out of town job or job search						
Lodging						
Tips and gratuities						
Laundry and dry cleaning						
Local transportation						
Auto rental for business*						
Gas, oil and repairs for rental auto*						
Local telephone and long distance business calls						
Other:						
Other:						
Total Expenses (Excluding Meals) <i>Transfer to Form 2106/2106EZ, Line 3</i>						
Meals <i>Transfer to Form 2106/2106EZ, Line 3</i>						