

**BUSINESS EXPENSES OF POLICE OFFICERS**

NAME: \_\_\_\_\_

YEAR: \_\_\_\_\_

SUPPLIES

Ammunition \$ \_\_\_\_\_

Ammunition pouch \_\_\_\_\_

Baton and Ring \_\_\_\_\_

Batteries \_\_\_\_\_

Clipboard \_\_\_\_\_

Clips \_\_\_\_\_

Earmuffs \_\_\_\_\_

Flashlight \_\_\_\_\_

Grips \_\_\_\_\_

Gun \_\_\_\_\_

Handcuffs \_\_\_\_\_

Holster \_\_\_\_\_

ID case \_\_\_\_\_

Key strap \_\_\_\_\_

Map book \_\_\_\_\_

Ticket book \_\_\_\_\_

Whistle \_\_\_\_\_

Other: \_\_\_\_\_

TOTAL: \_\_\_\_\_

UNIFORM PURCHASE

Boots \_\_\_\_\_

Emblems \_\_\_\_\_

Gloves \_\_\_\_\_

Gauntlets \_\_\_\_\_

Hat \_\_\_\_\_

Helmet \_\_\_\_\_

Jacket \_\_\_\_\_

Pants \_\_\_\_\_

Shirts \_\_\_\_\_

Shoes \_\_\_\_\_

Ties \_\_\_\_\_

Other: \_\_\_\_\_

TOTAL: \_\_\_\_\_

TELEPHONE

Answering service \_\_\_\_\_

Beeper/pager \_\_\_\_\_

Cellular \_\_\_\_\_

Faxes \_\_\_\_\_

Monthly base rate 2nd line \_\_\_\_\_

Toll \_\_\_\_\_

Phone Cards \_\_\_\_\_

Other: \_\_\_\_\_

TOTAL: \_\_\_\_\_

If you have any questions, please call:

**Grimes Tax**  
**Enrolled Agent**  
**2570 Gladiator Drive**  
**Fenton, MO 65026**  
**(636) 225-1114 Fax: (636) 225-1700**

DUES AND SUBSCRIPTIONS

Association dues \$ \_\_\_\_\_

Professional subscriptions \_\_\_\_\_

Union dues \_\_\_\_\_

Range Dues \_\_\_\_\_

Other: \_\_\_\_\_

TOTAL: \_\_\_\_\_

CONTINUING EDUCATION

Correspondence course fees \_\_\_\_\_

Meetings \_\_\_\_\_

Range fees \_\_\_\_\_

Registration \_\_\_\_\_

Seminar fees \_\_\_\_\_

Textbooks \_\_\_\_\_

Tuition \_\_\_\_\_

Other: \_\_\_\_\_

TOTAL: \_\_\_\_\_

UNIFORM & LAUNDRY

Alterations \_\_\_\_\_

Cleaning \_\_\_\_\_

Laundry and supplies \_\_\_\_\_

Other: \_\_\_\_\_

TOTAL: \_\_\_\_\_

UNCLASSIFIED

License and Permits \_\_\_\_\_

Gun cleaning Supplies \_\_\_\_\_

Bond \_\_\_\_\_

Errors & omissions insurance \_\_\_\_\_

Other: \_\_\_\_\_

Other: \_\_\_\_\_

TOTAL: \_\_\_\_\_

EQUIPMENT PURCHASES

	<u>DATE</u>	<u>AMOUNT</u>
Binoculars	_____	_____
Briefcase	_____	_____
Bullet proof vest	_____	_____
Gun	_____	_____
Reloader	_____	_____
Safety equipment	_____	_____
Safety glasses	_____	_____
Other: _____	_____	_____
_____	_____	_____
_____	_____	_____
Total:	_____	_____