

Year:

Employment Expenses

Client Name: ______Social Insurance Number:_____

Please Complete the following form with the information relevant to you. Your eligible expenses will be found on form T2200 Provided by your employer. <u>You do not need to provide receipts</u> but keep them in case the CRA (Canada Revenue agency) Requests to see them. Please provide this form to us at your earliest convenience in order to complete your return.

Expenses incurred to earn salary or commission income

Food:	Lodging:	Travel:
Parking:	Stationary:	Cell Phone:
Advertising:	Licences	and Fees:
Other (Specify):		
<u> Office – In – Home Exper</u>	ises	
Simplified:		
Dollar Amount Per Day: <u>\$2.00</u> Number Of Days Worked Form Home: (Max \$500.00)		
Advanced:		
Total Square Feet Of Home	e:	Square feet of Office:
Heat:	Electricity:	Water:
Insurance:	Maintenance	Property Tax:
Rent:		
Other (Specify):		
Business Use Of Vehicle:		
Make:	Model:	Year:
Total KM Driven for year:		KM Driven for Business Purposes:
Value Of Vehicle:	Fuel:	Insurance:
License Plate: Repair & Maintanance:		
Interest Paid on car Loan:		Lease Payments for year:
Other (Specify):		