

EMPLOYMENT EXPENSE CHECKLIST

For the year ending December 31, 2 _____

Name: _____

Are you paid by commission? YES NO (Circle one)

Do you have a completed T2200 - Declaration of Conditions of Employment? YES NO

Have you been reimbursed for any expenses YES NO (If so, explain for what and how much)

_____ \$ _____
_____ \$ _____

EXPENSES

Accounting \$ _____
Legal Fees _____
Food, Beverage & Entertainment _____
Lodging _____
Parking _____
Office Supplies _____
Other (Specify) _____

SPECIALTY

Apprentice mechanic tools _____
Musical Instrument costs _____
Capital cost allowance for instruments _____
Artist's employment expenses _____

USE OF HOME

Total square footage of home _____ Sq footage used for office _____
Total yearly utility bills _____ Total yearly heating cost _____
House insurance (see note) _____ Rent _____
Property Taxes (see note) _____ Home telephone _____

AUTOMOBILE - Same vehicle as last year? YES or NO (circle one)

Total KM used in year _____ KM travelled to earn income _____

LEASED VEHICLE:

Lease commencement date _____ Lease payments/month _____
Manufacturers list price (if new) _____

PURCHASED VEHICLE:

Manufacturers list price (if new) _____ Purchase date _____
Interest paid/year (if financed) _____

Please provide the total yearly costs for the following auto expenses:

Insurance _____ Licence/Registration _____
Maintenance/Repairs _____ Fuel and Oil _____
Other _____

NOTE: Only commissioned employees may claim house insurance and property taxes.