

Year: _____

Willson Income Tax: Employment Expenses

Client Name: _____ Social Insurance Number: : _____

Please complete the following sections only as they apply to you. Your eligible expenses will be outlined on form T2200 given to you by your employer. Return this form and form T2200 to our offices as soon as possible so that we can complete your return. Do not include receipts but keep them on file in case the Canada Revenue Agency asks to see them.

Expenses Incurred to Earn Salary or Commission Based Income

Food: _____ Lodging: _____ Travel: _____

Parking: _____ Stationary: _____ Cell Phone: _____

Advertising: _____ Licences and Fees: _____

Other (specify): _____

Office – In – Home Expenses:

Total Square Feet of Home: _____ Square Feet of Office: _____

Heat: _____ Electricity: _____ Water: _____

Insurance: _____ Maintenance: _____

Property Taxes: _____ 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: _____

Licence plates: _____ Maintenance & Repair: _____ Other (specify): _____

Interest paid on car loan: _____ Lease payments for year: _____

Office – In – Home Expenses

Indicate the total area of your home and the total area used for business purposes. List the total expense paid for the year in each category. Office in home only applies when you work from home more that 50% of the time according to what is indicated on your form T2200.

Business Use of Vehicle

Indicate the total kilometers driven for the year as well as the kilometres used for business purposes. Please indicate the fair market value of your vehicle and list the total expenses for the year in each category. If you purchased your vehicle and are repaying the loan, state the interest portion only paid during the year. If you are leasing the vehicle state the total amount of lease payments made during the year. Business use of vehicle will be reduced by the amount you were reimbursed (unless the reimbursement is included on your T4)

PLEASE CALL OUR OFFICE IF YOU HAVE ANY QUESTIONS PHONE: (519)969-6365 FAX: (519)969-3111