



**EMPLOYMENT EXPENSE CHECKLIST**

Small Business Accountants Ltd. requires this checklist be filled out every year when applicable prior to commencing the preparation of your Tax Return. Please fill it out completely and return it to our office along with any other forms required to process your Tax Return. You are responsible to ensure that the information stated on this form is factually correct as we will use this form to file your tax returns.

**If you own a business, have rental properties, have moved in the past year or are self-employed, please call our office** at (403) 257-6235 and we will send you the required additional checklists. Please call if you have any questions - we're here to help and make this as simple and efficient as possible.

**Please submit this form along with your Personal Checklist and other applicable forms**

For the year ending \_\_\_\_\_

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 yes, please explain for what and how much)

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**EXPENSES**

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



**EMPLOYMENT EXPENSE CHECKLIST (Cont.)**

**SPECIALTY**

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

**USE OF HOME - (disregard if you are submitting a Business Checklist)**

Total square footage of home \_\_\_\_\_ Sq footage used for office \_\_\_\_\_  
Total # of rooms in home \_\_\_\_\_  
Heat & Electricity \_\_\_\_\_ Total yearly heating \_\_\_\_\_  
House/Contents Insurance (See Note) \_\_\_\_\_ Residents Assoc. \_\_\_\_\_  
Property Taxes (See Note) \_\_\_\_\_  
Home Telephone \_\_\_\_\_  
Internet \_\_\_\_\_

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

**AUTOMOBILE** – Same vehicle as last year? YES or NO (Circle one)

Total KM used in year \_\_\_\_\_ KM traveled to earn income \_\_\_\_\_

**LEASE VEHICLE**

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

**PURCHASED VEHICLE:**

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

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

Insurance \_\_\_\_\_ License/Registration \_\_\_\_\_  
Repairs/Maintenance/Oil \_\_\_\_\_ Fuel Costs \_\_\_\_\_  
Other \_\_\_\_\_

**Is GST included in all of the above amounts? YES or NO (Circle one)**