

## CLIENT INFORMATION SHEET EMPLOYEE EXPENSES

Is a <u>T2200 Declaration of Conditions of Employment</u> provided by employer?	Y / N
Are you a commissioned sales representative?	Y / N
Are expenses limited to the amount of commissioned income?	Y / N

**OTHER EMPLOYMENT EXPENSES:** (NOT reimbursed by employer)

Checklist (included) **<u>OR</u>** Total \$ for Year:

Meals and entertainment Business fees, licenses, dues, memberships and subscriptions

Office expenses / Supplies	
Legal, accounting, and other professional fees	
Management and administration fees	
Rent (paid for space outside of the home)	
Travel (not including personal vehicle – see other section)	
Cell phone / other telecommunications	
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## CALCULATION OF BUSINESS-USE-OF-HOME EXPENSES (*if applicable*)

Area of home used for business Total area of home (# of main rooms or square footage) (# of main rooms or square footage)

Checklist (included) <u>**OR**</u> Total \$ for Year:

Heat	
Electricity	
Water	
Maintenance	
Insurance	(commission employees only)
Property taxes	(commission employees only)