

NAME OF BUSINESS: _____

TAX PERIOD: (YYYY/MM/DD) _____

REVENUE	Amount including HST
Fees/Sales/Commission	

BUSINESS EXPENSES

Purchases	
Sub contracts	
Other direct costs	
inventory/stock on hand at end of year	
Advertising	
Meals & entertainment	
Bad debts	
Insurance	
Interest	
Business tax, licences, fees	
Dues & membership	
Office expenses	
Supplies	
Professional fees	
Management/admin fees	
Rental	
Repairs & maintenance	
Salaries, wages and benefits	
Property tax	
Travel	
Telephone/internet	
Delivery, freight, courier	
Utilities	
Other expenses: Please specify	

AUTO EXPENSES:

Fuel	
Repairs & maintenance	
Lease payments	
Car washes	
Insurance	
Licence & registration	
Interest expense on car loan	
CAA	
Other: please specify	

TOTAL KMS FOR YEAR: _____ **TOTAL BUSINESS KMS:** _____

HOME OFFICE EXPENSES

Heat	
Electricity	
Insurance	
Repairs & Maintenance/maintenance fees	
Mortgage interest	
Property tax	
Water	
Other expenses: please specify	
or	
Apartment/house rental	

TOTAL SQ FT OF HOME: _____ **TOTAL SQ. FT OF OFFICE:** _____

Note:

It is understood and agreed that you will provide accurate and complete information to complete your tax return

Information above provided by:

Print name _____

Signature _____

Date: _____