Moving Expenses Deduction

Tax Year

First Name :	Last Name :	SIN Number :		
Part 1				
Distance in Kilometers				
Distance between your old home and new place of work or school (in Kilometers)			Line 1	
Distance between your new home and your new place of work or school (in Kilometers)			Line 2	
Line 1 minus Line 2 (if L	ine 3 is less than 40 kilometers, you are not o	qualifying) _	Line 3	
Date of move	Date you started work o		YY-MM-DD	
Main reason for the mov	ve: Work or Business Study / Full-tim	e School:		
Address of Old Home:	Street No and Street Name	Street No and Street Name Apt # (if Any)		
	City	Province	Postal Code	
Address of New Home:	Street No and Street Name	Ap	t # (if Any)	
	City	Province	Postal Code	
Name of New Employer	or School:			
Address of New Employ	ver or School: Street No and Street N			
	Street No and Street N	ame	Apt # (if Any)	
	City	Province	Postal Code	

Part 2 Transportation & Storage Cost for Household Items \$ _____ Name of Mover ___ Number of people moved _____ Travel Cost \$ _____ Method of Travel _____ Number of Nights _____ Accomodation Expenses \$ _____ Total Cost of Meals \$_____ Number of Days _____ Number of Meals _____ **Temporary Living Expenses Near New or Old Home (Maximum 15 Days)** Number of Nights _____ Number of Days _____ Accomodation Expenses _____ Meals Expenses _____ Cost of cancelling the lease for your old home Incidential Cost (related to move) \$ Specify details of the incidental cost _____ **Cost of Selling the Old Home** Real Estate Commissions \$ _____ Selling Price \$ _____ Legal or Other Fees \$ _____ Advertising \$ _____ Other Selling Cost\$ _____ Details of the Selling Cost _____ **Cost of Buying the New Home** Tax & Transfer Fees Payment \$_____ Purchase Price \$ _____ Other Purchase Cost \$ _____ Legal or Other Fees \$ _____

Other Details

Allowance or Reimbursement (not included in T4 or income) \$

Net Elligble Income (from new place of work) \$ _____