



2021 EMPLOYMENT EXPENSE SUMMARY

Please provide the information noted below if you are required by your employer to pay for your own expenses. Please separate, total, and summarize any receipts provided by each expense category, noting additional details on a separate sheet if needed. Please provide a copy of your 2021 T2200 Declaration of Conditions of Employment signed by your employer.

Taxpayer Name: _____

Expenses

Accounting and Legal	\$ _____
Advertising and Promotion	\$ _____
Food, beverage & entertainment	\$ _____
Lodging	\$ _____
Rent	\$ _____
Salary	\$ _____
Supplies	\$ _____
Travel	\$ _____
Employed trade person's tools	\$ _____
Other (specify)	\$ _____
	\$ _____

Home Office *

* expenses for non-commissioned employees are generally limited to employment-related heat, electricity, water and maintenance

Area of business/employment use (square feet or # of rooms)	_____
Total house area (square feet or # of rooms)	_____
Heat, electricity, water	\$ _____
Insurance	\$ _____
Maintenance	\$ _____
Property taxes	\$ _____
Other (specify)	\$ _____
	\$ _____
	\$ _____

Motor Vehicle Expenses

Make/year of vehicle _____

If acquired or sold during the year, please indicate the purchase/sale date and costs/proceeds

Km for business/employment	_____
Total km driven	_____
Fuel and oil	\$ _____
Maintenance and repairs	\$ _____
Insurance	\$ _____
License and registration	\$ _____
Interest	\$ _____
Leasing costs	\$ _____
Parking	\$ _____

Other Information
