

Business Expenses			
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Client Name:	_		
Tax Year:			
		January to December	
Expenses	Totals with Tax	HST	
Advertising			
Meals and entertainment			
Bad debts			
Insurance		N/A	
Interest		N/A	
Buisiness taxes, licenses, dues and memberships			
Office expenses *			
Office stationery and supplies			
Professional fees (including legal & accounting fees)			
Management and administration fees			
Rent			
Repairs & maintenance			
Motor vehicle expenses **			
Salaries, wages, and benefits		N/A	
Property taxes (not for home office)		N/A	
Travel expenses			
Telephone and Utilities (not for home office)			
Fuel costs (for motor vehicles used 100% for business)			
Delivery, freight and express			
Private health plan premiums		N/A	
Other expenses, please specify:			
, , ,			
Total Expenses	_	-	
* Please complete our Home Office Expense Schedule			
** Please complete our Car Expense Worksheet			

CHARTERED PROFESSIONAL ACCOUNTANTS