

GsA GARY S. ASLETT PROFESSIONAL CORPORATION
 Chartered Professional Accountant • Chartered Accountant • Certified Financial Planner

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HOME OFFICE EXPENSES CHECKLIST

Name _____
Tax Year _____

NOTE: Complete one column ONLY based on your tax status:

		<u>Salaried employees</u>	<u>Commissioned employees</u>	<u>Self-employed</u>
Area of home used for workplace	_____ sq. ft.			
Total <u>finished area</u> of home	_____ sq. ft.			
Gas	_____	\$ _____	_____	_____
Hydro	_____	\$ _____	_____	_____
Water	_____	\$ _____	_____	_____
Rent	_____	\$ _____	_____	_____
Condo fees	_____	\$ _____	_____	_____
Security monitoring fees (commission employees and self-employed only)	_____	\$ N/a	_____	_____
House insurance (commission employees and self-employed only)	_____	\$ N/a	_____	_____
Property taxes (commission employees and self-employed only)	_____	\$ N/a	_____	_____
Internet (commission employees and self-employed, if used for employment or business)	_____	\$ N/a	_____	_____
Mortgage interest (self-employed only) - do not include principal repayments in this amount	_____	\$ N/a	N/a	_____

Maintenance & repairs **specific only to the home office area** (describe below):

EXCLUDE from maintenance & repairs for all 3 columns the following: maintenance not incurred for the workspace; gardening/landscaping; capital improvements.

_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
Other expenses (please describe):			
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
Column Total	\$ _____	_____	_____