

## Employment Expense Schedule

|                  |  |
|------------------|--|
| <b>Name:</b>     |  |
| <b>Address:</b>  |  |
|                  |  |
| <b>Employer:</b> |  |
|                  |  |
| <b>Period:</b>   | January 1, 2024    to    December 31, 2024 |
|                  |  |

**Note: the expenses claimed below must be allowed for on the  
T2200 Declaration of Employment Conditions  
signed by your employer**

|                                 |  |  |
|---------------------------------|--|--|
|                                 |  | \$   |
| <b>Assistant</b>                |  | \$   |
| <b>Cell Phone</b>               |  | \$   |
| <b>Entertainment</b>            |  | \$   |
| <b>Licenses</b>                 |  | \$   |
| <b>Meals</b>                    |  | \$   |
| <b>Office Supplies</b>          |  | \$   |
| <b>Parking</b>                  |  | \$   |
| <b>Tools of Trade</b>           |  | \$   |
| <b>Training</b>                 |  | \$   |
| <b>Travel - Accommodations</b>  |  | \$   |
| <b>Travel - Flight</b>          |  | \$   |
| <b>Travel - Taxi/Car Rental</b> |  | \$   |
|                                 |  | \$   |
|                                 |  | \$   |
|                                 |  | \$   |
|                                 |  | \$   |
|                                 |  |  |
| <b>Automobile Expenses</b>      |  | <b>Please fill out Automobile Expense Schedule</b> |
| <b>Office-in-Home Expenses</b>  |  | <b>Please fill out Office-in-Home Schedule</b>     |