
Statement of Home-Office Expenses

For the year (MM/DD/YY): _____

	Included HST in Amount	<u>Total Amount Paid</u>	Additional Notes
Heat			
Insurance			
Interest on Mortgage (Please make sure you have excluded any principal payment)			
Electricity			
Property Taxes			
Rent (If you have rented a house, apartment, ...)			
Repairs & Maintenance			
Water			
Other:			
Amount of sq. ft. used for Business from your living space		Sq. ft.	
Total sq. ft. of you living space		Sq. ft.	
Number of Business room(s) of your living space		Room(s)	
Total room(s) in your living space		Room(s)	

Please Note:

If any of the above categories are not applicable to you, kindly enter the value "0" in that field such that we know that you have acknowledged that field and have not accidentally forgotten to fill in any specific field in the form. Thank you.

Statement of Footage of your Living Space

For the year (MM/DD/YY): _____

Number of Rooms			Area in Square Footage		
Office	Personal	Total	Office	Personal	Total

Living Room					
Dining Room					
Family Room					
Bedroom					
Office					
Office					

Other:

Total					
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Percentage					
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