



BUSINESS INCOME AND EXPENSE STATEMENT

Name: _____ SIN: _____
 Name of Business: _____ Address of Business: _____
 Partnership?: _____ Name of partner: _____
 Main Product or Service: _____
 Statement _____ Statement _____
 Start Date: _____ End Date: _____

Was this the last year of Business?: YES / NO

INCOME (Business-related only)

INCOME (total from all business activities) A \$ _____
 Minus GST & PST (if included in income above) B \$ _____
 NET INCOME (Line A minus Line B) C \$ _____

Did you Collect GST/PST? (YES / NO) Did you remit the GST/PST? (YES / NO)

EXPENSES (Business-related only)

Advertising (business cards, newspaper, radio, etc.) \$ _____
 Bad Debts (uncollected NSF cheques, accounts receivable) \$ _____
 Business Tax, Fees, Memberships \$ _____
 Delivery & Freight Charges \$ _____
 Business Insurance \$ _____
 Bank Charges \$ _____
 Legal & Accounting Fees \$ _____
 Office Expenses \$ _____
 Supplies \$ _____
 Cell Phone/Pager \$ _____
 Long Distance Charges \$ _____
 Travel Expenses (hotel, airfare, etc.) \$ _____
 Meals & Entertainment \$ _____
 Training \$ _____
 Other Misc. (indicate – use a second page if necessary) \$ _____

OFFICE SPACE (EXPENSES)

DID YOU OPERATE YOUR BUSINESS FROM YOUR HOME?: YES
 Square Footage of Home: _____ ft² Square footage used for Business: _____ ft²

Rent Paid \$ _____
 Property Tax Paid (if applicable) \$ _____
 Mortgage Interest Paid (if applicable) \$ _____
 Utilities (heat, hydro, etc.) \$ _____
 Maintenance and/or Repairs \$ _____
 House/Office Insurance \$ _____
 Phone \$ _____
 Internet & Website Services \$ _____



VEHICLE EXPENSES #1

Year and Model of Vehicle: _____
 Date Acquired: _____ Total km in Year _____ Business km _____
 Original Purchase Price: \$ _____ Value at 01 Jan: \$ _____

Fuel/Oil	\$ _____	
Maintenance/Repairs	\$ _____	
Insurance	\$ _____	
License & Registration Fees	\$ _____	
Lease Payments (if applicable)	\$ _____	
Interest on Loan (if borrowed for vehicle)	\$ _____	
Other Misc. (indicate)	\$ _____	\$ _____
		\$ _____

VEHICLE EXPENSES #1

Year and Model of Vehicle: _____
 Date Acquired: _____ Total km in Year _____ Business km _____
 Original Purchase Price: \$ _____ Value at 01 Jan: \$ _____

Fuel/Oil	\$ _____	
Maintenance/Repairs	\$ _____	
Insurance	\$ _____	
License & Registration Fees	\$ _____	
Lease Payments (if applicable)	\$ _____	
Interest on Loan (if borrowed for vehicle)	\$ _____	
Other Misc. (indicate)	\$ _____	\$ _____
		\$ _____

TOTAL BUSINESS EXPENSES _____

I/We certify that the above is an accurate statement of my/our business income and expenses as witnessed by my/our signature(s).

DATED AT _____, on this _____ day of _____, 20____

Signed

X

X