

Summary of Unincorporated Business's Activities for the Year:								
Owner's Name(s):								
Business Name:								
Nature of Business								
Business Address:								
Contact Info.:	Home			Work				
_	Cell			E-mail				
Sole Proprietor	Partner	%	Partner Name:					
	Partner	%	Partner Name:					
Federal Business Number	er (HST Reg. N	Number) if appl	icable:					
Ara Wa ta Camplat	a UCT Dan	mittonoo Eo	vrm(a)2 Vaa	☐ No ☐ If yes, pl	legge include your UST Form(s)			
Are We to Complet	e no i kei	ilitiance Fo	iiii(s)? Tes	□ NO □ II yes, pi	lease include your HST Form(s)			
If No, Please Include Cop	ies of HST Re	emittance Form	ıs You Have Subn	nitted to CRA (if applicable) T	his Year.			
				· · · · /				
Sales, Commiss	ions or F	ees (Busin	ess Income)					
Type of Business	Income	Total Business Income		HST Collected (if	Net Sales (excluding HST)			
		(include HS	T if Applicable)	Applicable)				
	\$ -			\$ -	-			
Returns, Allowances	and Discou	nts (Complet	e <u>ONLY</u> if Inclu	ded in Business Income	Above)			
Type of Return/Allo	w/Disc.	Total (ii	ncluding HST)	HST Collected (if Applicable)	Total Net Returns/Allow/Disc. (excluding HST)			
		1_		<u> </u>				
		\$	-	-	\$ -			
Home Office Exp	enses (<u>in</u>	clude HST whe	re applicable)					
Area of Home Used for Business (in square feet/metres)					\$			
Total Area of Home (in square feet/metres)					\$			
Heat					\$			
Electricity					\$			
Water/Sewer (if applicable)					\$			
Insurance (Homeowner's or Tennant's)					\$			
General Maintenance & Repairs					\$			
Mortgage InterestPlease include Mortgage Statement					\$			
Property Taxes PaidPlease include Tax Bill					\$			
Rent (if Home is Rented)					\$			

Business Expenses

NOTE: Complete "HST Paid" column <u>ONLY</u> if you have a HST Registration Number (BN)

If you do not have a HST Registration Number; we do not require the "Net Paid" amount

If you are completing this form in Excell; spreadsheet will calculate "Net Paid" when you enter "HST Paid"

Cost of Goods Sold (COGS)	Total Paid Including HST	HST Paid (enter only if HST Reg.)	Net Paid (excludir	ng HST)	
Opening Inventory (including raw materials, goods in process, finished goods, goods ready for			\$	-	
Purchases (including raw materials, goods in process, finished goods, goods ready for sale, and			\$	-	
Subcontracting Expenses			\$	-	
Closing Inventory (including raw materials, goods in process, finished goods, goods ready for			\$	-	
	cogs	\$ -	\$ -	\$	-

Business Expenses	Total Paid Including HST	HST Paid (enter only if HST Reg.)	ly if Net Paid (excluding HST)	
Advertising/Promotion			\$ -	
Bad Debts				\$ -
Business Tax, Fees, Licences, Dues, Memberships & Subscriptions				\$ -
Delivery & Freight				\$ -
Insurance (do not include Life, Health or Vehicle Insurance or amount for Home Office	ce)			\$ -
Interest and Bank Charges				\$ -
Maintenance & Repairs (do not include amount for Home Office)				\$ -
Management & Administration Fees				\$ -
Meals & Entertainment (total amount for year, we will calculate allowable portion)				\$ -
Office Expenses				\$ -
Legal, Accounting, and other Professional Fees				\$ -
Property Taxes (do not include amount for Home Office)				\$ -
Rent (do not include amount for Home Office)			\$ -	
Salaries, Wages and Benefits				\$ -
Supplies (do not include any items that are part of COGS above)			\$ -	
TravelAccomodations, Air/Train Fares, etc. (do not include Vehicle Costs)			\$ -	
Telephone, Cell Phone			\$ -	
Internet Service			\$ -	
Utilities (do not include amount for Home Office)			\$ -	
Convention Fees			\$ -	
Private Health Services Plan Premiums			\$ -	
Other Expenses (please specify)			\$ -	
Other Expenses (please specify)		-	\$ -	
	Total Business Expenses	\$ -	\$ -	\$ -

Motor Vehicle Expenses

IMPORTANT!

If You Leased or Purchased a New or Used Vehicle(s) During the Year, Please Provide a Copy of the Lease, Loan and Purchase Agreement(s)

If You are a New Client, Please Include Copies of any Existing Vehicle Lease, Loan, and Purchase Agreement(s)

Note: Parking Tickets and Traffic Fines are NOT allowable business expenses

Vehicle 1	The following information	on relates ONL	Y to this veh	icle.			
Description of Vehicle:	3					Own Lease	
				I Driven in the Year			
Total Annual Vehicle	siness portions)		Total Paid Including HST	HST Paid (enter only if HST Reg.)	Net Paid (excluding HST)		
Fuel (gasoline, propane)							\$ -
Maintenance & Repairs							\$ -
Insurance							\$ -
License and Registration							\$ -
Interest on Vehicle Loan							\$ -
Lease Payments		-					\$ -
			Total Veh	icle Expenses	\$ -	\$ -	\$ -
Other Vehicle Related	Expenses:			r			
Parking Charges							\$ -
Tolls							\$ -
		Tota	al Vehicle Rela	ted Expences	\$ -	\$ -	\$ -
Did You Sell or Trade-in 1	This Vehicle During the Year	? No Yes	If yes, com	plete line(s) be	low		
Trade in Amount Received: If Sold, the Amount R				, the Amount R	eceived for Vehicle		
Vehicle 2	The following information relates ONLY to this vehicle.						
Description of Vehicle:	escription of Vehicle:					ease	
				TOTAL KN	M Driven in the Year		
Total Annual Vehicle Expenses for Vehicle 2 (include personal and business portions)				Total Paid Including HST	HST Paid (enter only if HST Reg.)	Net Paid (excluding HST)	
Fuel (gasoline, propane)						\$ -	
Maintenance & Repairs						\$ -	
Insurance						\$ -	
License and Registration						\$ -	
Interest on Vehicle Loan						\$ -	
Lease Payments						\$ -	
Total Vehicle Expenses				\$ -	\$ -	-	
Other Vehicle Related	Expenses:			F			
Parking Charges						\$ -	
Tolls					\$ -		
		Tota	al Vehicle Rela	ted Expences	\$ -	\$ -	-
Did You Sell or Trade-in t	his Vehicle During the Year?	No Yes	If yes, co	mplete line(s) b	pelow		
Trade in Amount Received: If Sold, the Amount R			the Amount Re	eceived for Vehicle:			

Capital Assets

Include Only Those Items Purchased During the Year Whose Cost (before taxes) was \$500.00 or More

If the item's cost was below \$500, include as an expense in the appropriate category on previous page

Furniture & Fixtures		Total Paid Including HST	HST Paid (enter only if HST Reg.)	Net Paid (excluding HST)
Item(s)				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
	Furniture & Fixtures Total	\$ -	\$ -	\$ -
Computer			1	•
Item(s)				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
	Computer Total	\$ -	\$ -	\$ -
Equipment				ı
Item(s)				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
	Equipment Total	\$ -	\$ -	\$ -
Vehicle(s)Include copy of Purchase Agreement				1
Item(s)				\$ -
				\$ -
				\$ -
	Vehicle Total	\$ -	\$ -	\$ -
Other Assets				
Item(s)				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
			_	\$ -
	Other Assets Total	\$ -	\$ -	\$ -