

Information we are waiting for:

Questions:

Business Information Sheet for 2018

Business Name: _____

Address: _____

*Owner(s): _____ Ph. # _____

*Date Business was established: _____ Product or Service: _____

*Business Number: _____ * HST registered? **Yes / No**

*Total Sales/Revenue: _____

*Do you earn income from a web site/internet?: _____

*HST included in sales? **Yes / No** HST collected _____

*Opening Inventory: _____

HST Paid

*Purchases: _____

Sub-contract Expense: _____

*Closing Inventory: _____

*Expenses: (need totals for any of the following exp. that apply to your business)

Advertising (gifts/promo) _____

Meals & Entertainment(@ 100%) _____

Bad Debt(uncollectible customers) _____

Insurance (Business Liability) _____

Interest on business loans _____

Bus.reg.,fees,lic.,dues,mbrshps,&subscriptions _____

Office Expenses _____

Office Stationery & Supplies _____

Professional Fees(Lawyer/Acct./Tax Prep) _____

Mngmnt./admin. fees & bank chgs. _____

Rent _____

Maint. & Repairs _____

Salaries/Wages/Benefits(incl. employer contributions) _____

Traveling Expense (trans./accom) _____

Utilities,Cell ph. & internet for office space outside the home _____

Freight & Delivery _____

Other: _____

Other: _____

Other: _____

***Capital Expenditures:** (over \$500.00 for tools or over \$200.00 for anything else)

HST Paid

Computer, Office Equipment: _____

Any other purchases over \$200 _____

Previous personal items now used for business: _____

***Automobile Expenses:** (are you claiming auto exp.? Yes/No)

Type of Vehicle: _____

Odometer reading: starting _____ ending _____ difference _____

Is this the same vehicle used last year? _____

Approx. value of vehicle (if first year of business) _____

Cost if purchased in 2018 (we require sales/purchase receipt) _____

Km's Driven for business: _____

Total km's driven: _____

Total Gas Purchases: _____

Interest on loan (purchase): _____

Insurance: _____

License Renewal Fee: _____

Maintenance & Repairs: _____

Leasing: (Start and ending date of lease) _____

Down Payment on Lease _____

Parking: _____

Other: _____

***Home Office Expenses:** (Are you claiming home office exp.? Yes/No)

To qualify as home office expense, one of these two criteria must be met.

1. It is your principal place of business (>50%) or
2. You use it to earn business income on a regular basis to meet clients

Business use sq. ft: _____ Total House sq. ft: _____ % used for business: _____

Heat: _____

Electricity: _____

Insurance: _____

Maintenance: _____

Mortgage Interest: _____

Property Tax: _____

Water: _____

Rent: _____

Internet: _____

Other: _____