

Required Information for Self-Employed Persons

Name: _____

Fees:	T4A:	\$ _____
	T4A:	\$ _____
	T4A:	\$ _____
	T4A:	\$ _____
	Fees not included on a T4A:	\$ _____
Total fees <i>(please ensure that this amount reflects your bank deposits):</i>		\$ _____

Advertising <i>(newspaper ads, etc.):</i>	\$ _____
Meals and entertainment <i>(including liquor - SAQ):</i>	\$ _____
Gifts to clients <i>(other than liquor - SAQ):</i>	\$ _____
Insurance - liability:	\$ _____
Dues and memberships - required contributions:	\$ _____
Other dues and memberships <i>(please provide receipts):</i>	
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total contributions for other dues and memberships:	\$ _____

Interest on line of credit and bank charges:	\$ _____
Interest on professional loans <i>(not including interest on student loans):</i>	\$ _____

Required Information for Self-Employed Persons (cont'd)

2023

Office expenses (*stationery, etc.*): \$ _____

Reference books: \$ _____

Professional fees: Accounting: \$ _____

Legal: \$ _____

Total professional fees: \$ _____

Rent (*other than home office*): \$ _____

Maintenance and repair of rental facility (*other than home office*): \$ _____

Salaries, including employer contributions: Salaries: \$ _____

Employer contributions - Federal: \$ _____

Employer contributions - Québec: \$ _____

Total salaries and employer contributions: \$ _____

Fees for sub-contractors: \$ _____

Travel expenses and conventions: Convention (*registration fees*): \$ _____

Meals during convention: \$ _____

Parking and taxi for convention: \$ _____

Travel expenses: \$ _____

(*out-of-town travel: transportation, hotel, etc.*)

Total expenses for travel and conventions: \$ _____



Required Information for Self-Employed Persons (cont'd)

2023

Telecommunications expenses:	Cell phones:	\$ _____
	Internet:	\$ _____
Total expenses for telecommunications:		\$ _____

Dry cleaning and uniforms:	\$ _____
Supplies:	\$ _____
Maintenance and repairs of equipment:	\$ _____
Examination fees:	\$ _____

Continuing education fees:	Registration fees:	\$ _____
	Meals during continuing education:	\$ _____
	Travel expenses during continuing education:	\$ _____
Total fees for continuing education:		\$ _____

Insurance - prescription drugs and medical health plan (please provide receipts):	\$ _____
<i>(Do not include premiums for life or disability insurance, these are not deductible)</i>	
Other expenses: _____	\$ _____
Other expenses: _____	\$ _____
Other expenses: _____	\$ _____
Leasing contracts (please provide contract): _____	\$ _____



Required Information for Self-Employed Persons (cont'd)

2023

Purchase (please provide invoices)	Date of purchase	Amount (\$)
Equipment: _____	_____	\$ _____
Equipment: _____	_____	\$ _____
Total for equipment:		\$ _____
Computer: _____	_____	\$ _____
Computer: _____	_____	\$ _____
Total for computers:		\$ _____
Software: _____	_____	\$ _____
Software: _____	_____	\$ _____
Total for software:		\$ _____

