

Instructions

Please complete a "Travel Worksheet" for each trip taken in 2009. Fill out the expense summary below and attach the supporting receipts. Each taxpayer that receives the taxable travel benefit may claim up to two trips per year for every member of their household.

In the case of coupled returns where both spouses have received the taxable travel benefit (box 32) on their T4 please identify the family name and leave the taxpayer name blank. Each trip will be applied to the spouse's return that will have the largest benefit to the household unless otherwise directed.

This is the summary that will be transmitted to Canada Revenue Agency to support your claims for the Northern Residents' Deductions - Travel Deduction should your return be reviewed at a later date.

Travel Worksheet for 2009

Family Name: _____ **Taxpayer:** _____
(If returns are coupled leave blank)

Trip Number : _____ of _____ **Trips in 2009**

Spouse One: Name _____ Total amount of box 32 benefit from all T4s \$ _____

Spouse Two: Name _____ Total amount of box 32 benefit from all T4s \$ _____

Trip Details

Names of Household Members on Trip:

1. _____	4. _____
2. _____	5. _____
3. _____	6. _____

Purpose of Trip: Medical Other (Vacation)

Destination:
 (Routing) _____

Travel Dates: Trip Start Date: _____ Trip End Date: _____

Total Number of Days: _____ Total Number of Nights: _____

Primary Method of Travel: Air Automobile Other

Trip Expenses

	<i>Attached</i>	<i>Cost</i>
Airfare Expense If Applicable:		
Airline Itinerary, Airline Receipt, and/or Airline Boarding Passes	<input type="checkbox"/>	\$ _____
Automobile Expense If Applicable:		
Rental Vehicle Contract and/or Invoice	<input type="checkbox"/>	\$ _____
Total Distance Driven (private vehicle) _____ kms		
Fuel And Maintenance Expenses Incurred on Trip	<input type="checkbox"/>	\$ _____
or, Simplified Automobile Expense Calculation (Total kms driven _____ X \$0.58 = _____)		\$ _____
Accommodations Expense:		
Hotel/Motel Invoice(s)	<input type="checkbox"/>	\$ _____
Camp Ground Receipts	<input type="checkbox"/>	\$ _____
Resort Invoice	<input type="checkbox"/>	\$ _____
Meals Expense:		
Restaurant receipts	<input type="checkbox"/>	\$ _____
Grocery receipts	<input type="checkbox"/>	\$ _____
or, Simplified Meal Expense Calculation (Number of days _____ x 3 meals x \$17 x number of people = _____)		\$ _____
Other:		
Bus receipts attached cost	<input type="checkbox"/>	\$ _____
Train receipts attached cost	<input type="checkbox"/>	\$ _____
Taxi receipts attached cost	<input type="checkbox"/>	\$ _____
Road and Ferry Toll receipts attached cost	<input type="checkbox"/>	\$ _____

Total Trip Expense		_____

Supporting Receipts and T4 attached