

AVW Accounting Services

T.: (204) 691-3208 E.: amber@avwaccounting.com W.: www.avwaccounting.com

Self-Employment or Unincorporated Business Checklist

1. Identification:

Business name: _____

Business address: _____

City/Prov.: _____ Postal Code: _____

Phone (Home): _____ Phone (Work): _____

E-Mail: _____ Fax: _____

Business number: _____ Business activity: _____

Partnership: _____ (yes/no)

Fiscal year-end: _____ When did your business commence? _____

2. Income and Expenses:

Income:

Sales, commissions, or fees (excluding GST and PST, or HST) _____

GST and PST, or HST collected on sales _____

Other income _____

Are you using the GST Quick Method? _____ (yes/no)

Expenses:

Advertising, promotion, gifts, etc. _____

Bad debts _____

Bank and credit card charges and fees _____

Business tax, fees, licences, dues, memberships, and subscriptions _____

Delivery, freight, express, and courier costs _____

Insurance _____

Interest _____

Internet and network services _____

Maintenance and repairs _____

Meals and entertainment _____

Office expenses _____

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Private health insurance premiums _____
Professional fees (legal, accounting, etc.) _____
Property taxes _____
Rent _____
Salaries, wages, and benefits _____
Supplies _____
Telephone _____
Travel _____
Utilities _____

Other expenses (list below and provide details):

Clothing _____
Hair _____

Automobile Expenses:

Kilometres driven in the year for business _____
Total kilometres driven in the year _____

Please provide the total annual amounts for the following:

Auto club (i.e., CAA) _____
Car washes _____
Fuel and oil _____
Interest paid on car loan or lease cost _____
Insurance _____
Licence and registration _____
Maintenance and repairs _____
Parking _____

Other vehicle expenses (list below and provide details):

If you purchased a vehicle for business use, please provide your purchase agreement showing purchase price, trade-in value, and down payment.

If you lease a vehicle for your business, please provide a photocopy of the lease agreement showing the manufacturer's list price and down payment.

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Work space in the home expenses:

Square footage of business use OR Room(s) used for business purposes _____
Total square footage of home OR Total number of rooms in home _____

Please provide the total annual amounts for the following (do not prorate)

Electricity _____
Heat _____
Insurance _____
Maintenance and repairs _____
Mortgage interest _____
Property taxes _____
Rent _____
Security _____
Snow removal and landscape maintenance _____
Water and sewage _____
Other expenses (list below and provide details): _____

3. Capital Assets (purchased or sold during year):

Please provide a description of the assets as well as the amounts involved
in the purchase of new assets or the sale of old assets.

| Description: | Purchase Price of New Asset | Selling Price of Old Asset |
|----------------------------|-----------------------------|----------------------------|
| Computers | _____ | _____ |
| Equipment | _____ | _____ |
| Furniture | _____ | _____ |
| Software | _____ | _____ |
| Tools | _____ | _____ |
| Computers | _____ | _____ |
| Other assets (list below): | _____ | _____ |

4. Other Information:

Please provide a list of "accounts receivable" and "accounts payable" at your year-end.

Please provide a detailed listing of GST collected on sales and GST paid on expenses,
and please include copies of GST returns filed (or not yet filed) and installments paid.