

CLAIM FOR MEALS AND LODGING EXPENSES

- Use this form if you are a transport employee, such as an employee of an airline, railway, bus or trucking company.
- See the latest version of Information Circular 73-21, *Away-From-Home Expenses*, and the income tax guide called *Employment Expenses* for details.
- If there is not enough space below, attach another sheet of paper. Keep receipts to support your claim in case we ask you for them.

Employee information - (To be completed by the employee)

Family or last name		Usual first name			Social insurance number						
Period of employment during 19 ____		From	19 ____	To	19 ____	Method used					
						Detailed	<input type="checkbox"/>	Simplified	<input type="checkbox"/>	Batching	<input type="checkbox"/>

Trip and expense summary - (To be completed by the employee)

Number of		Average no. of hrs per trip*	Home terminal	Away from home terminal	Service classification**	Meals purchased		Lodgings	
Days	Trips					No.	Cost	No.	Cost
						\$			\$

Total amount for meals purchased	_____ (1)
Subtract the total repayments you received or will receive for any of these expenses	_____ (2)
Subtotal (line 1 minus line 2)	_____ X 50%*** = _____ (3)
Total amount paid for lodging	_____ (4)
Subtract the total repayments you received or will receive for any of these expenses	_____ (5)
Subtotal (line 4 minus line 5)	_____ (6)
Allowable claim: total of lines 3 and 6. Enter this amount on line 229 of your income tax return.	_____ (7)

Note: * The "Average no. of hrs per trip" is the average length of time you spent away from the municipality and metropolitan area (if there is one) where your home terminal is located.
 ** "Service classification" applies only to claims made by **railway employees**. Enter your class of service such as engineer, trainman, maintenance man, conductor, motorman, machine operator, "maintenance of way" employee.
 *** This percentage applies to the detailed, simplified, and batching methods.

Certification by employee

I _____ of _____
(Print name) (Address)

certify that the above information is a true statement of the actual expenses I paid while I was away from my home terminal during 19 ____.

Date _____ Signature _____

Employment information - (To be completed by the employer)

- Is your company's principal business the transportation of goods, passengers, or both? Yes No
- What is the name of the collective agreement that governs this employee's employment with your company?

- a) Are subsidized meals available to this employee? Yes No
 b) If yes, what is the cost to this employee? \$ _____
- a) Is the employee entitled to receive an allowance or repayment for:

• meals	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount \$ _____
• lodging	Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount \$ _____
- b) How much of the allowance or repayment did you report on this employee's T4 slip? \$ _____

Name of employer: _____
 Date _____ 19 ____ Telephone _____
 Signature of employer or authorized officer _____
 Name (please print) _____