



CLAIM FOR MEALS AND LODGING EXPENSES

- Use this form if you are an **employee of a transport business**, such as an airline, railway, bus or trucking company, or if you are an **other transport employee**, as defined in Chapter 4 of Guide T4044, *Employment Expenses*, including a long-haul truck driver.
- You complete **Parts 1 and 2**, and your employer completes **Part 3**. For details, see Chapter 4 of Guide T4044, *Employment Expenses*.
- Keep receipts to support your claim in case we ask you for them.
- You do not have to send this form with your return, but keep it in case we ask to see it later.

Part 1 - Employee information

Last name Client		First name Valued		Social insurance number 111 111 118	
Period of employment during 2008		From: 2008/01	To: 2008/12	Method of calculation used Simplified <input checked="" type="checkbox"/> Detailed <input type="checkbox"/> Batching <input type="checkbox"/>	

Part 2A – Trip and expense summary not including eligible travel periods of long-haul truck drivers

Number of Days	Trips	Average no. of hrs. per trip *	Home terminal	Away from home terminal	Service classification **	Meals bought		Lodging and showers		
						No.	Cost (in Canadian dollars)	No.	Cost (in Canadian dollars)	
						Totals	(i)		(ii)	

Total amount you paid for meals from line (i) in Part 2A (above)	<u>8523</u>	1	
Subtract the total amount you received or will receive for any of these expenses	-	2	
Subtotal (line 1 minus line 2)	=	X 50%	= <u>3</u>
Total amount you paid for meals from line (iii) in Part 2B (below)	<u>8528</u>	4	
Subtract the total amount you received or will receive for any of these expenses	-	5	
Subtotal (line 4 minus line 5)	=	X 65%	= <u>6</u>
Total amount you paid for lodging from line (ii) in Part 2A (above)		7	
Total amount you paid for lodging from line (iv) in Part 2B (below)	+	8	
Subtotal (line 7 plus line 8)		9	
Subtract the total amount you received or will receive for any of these expenses	-	10	
Subtotal (line 9 minus line 10)	<u>9200</u>	=	+ <u>11</u>
Allowable claim: Add lines 3, 6, and 11. Enter this amount on line 229 of your return.			= <u>12</u>

- Notes**
- * Enter the average length of time you spent away from your employer's home terminal. The employer's **home terminal** is the employer's establishment where you report for work.
 - ** This applies only to claims that **railway employees** make. Enter your class of service (for example, engineer, maintenance worker, conductor, machine operator, maintenance-of-way employee).

Part 2B – Trip and expense summary for eligible travel periods of long-haul truck drivers

Number of Days	Trips	Average no. of hrs. per trip *	Home terminal	Away from home terminal	Service classification **	Meals bought		Lodging and showers		
						No.	Cost (in Canadian dollars)	No.	Cost (in Canadian dollars)	
						Totals	(iii)		(iv)	

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Certification by employee

I certify that the above information is a true statement of the actual expenses I paid while I was away from my home terminal during Year
2008.

Date 2009/05/07 Signature _____

Part 3 - Employment information (to be completed by the employer)

1. Is your company's main business the transportation of:

	* goods	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	* passengers	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

2. What is the name of the collective agreement that governs this employee's employment with your company?

3. Is the employee ever required for his or her job to be away for at least 12 **consecutive** hours from the municipality and metropolitan area (if there is one) where the employee regularly reports to work?

	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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4. a) Is the employee a long-haul truck driver?

	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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 b) If yes, is the employee ever required for his or her job to be away for at least 24 consecutive hours from the municipality or metropolitan area (if there is one) where the employee regularly reports to work, and to travel at least 160 kilometres from the employer's establishment to which the employee regularly reports to work?

	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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5. Are subsidized meals available to this employee? Yes No
 If **yes**, what is the total cost to this employee? _____

6. 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? _____

Certification by employer

I certify that the information provided in Part 3 is, to the best of my knowledge, correct and complete.

_____ Name of employer	_____ Name of authorized person	
<u>2009/05/07</u> Date	() Telephone	_____ Signature of employer or authorized person