



2026 Home Office Claim

Name: _____

Office Area	_____
Garage Area	_____
Storage Area	_____
Total Business Use	_____
Total Area of Home and Garage	_____

EXPENSES:

Rent (if property not owned)	\$ _____
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Power :	\$ _____
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Rates:	\$ _____
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Interest:	\$ _____
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Insurance: Home	\$ _____
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Contents	\$ _____
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Repairs and maintenance:	\$ _____
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Other - please provide details	\$ _____
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_____ %

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