



CHARTERED PROFESSIONAL
ACCOUNTANTS

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BARBER & HAIME
CHARTERED PROFESSIONAL
ACCOUNTANTS

B. RUSHTON INC. ▪ KMA CHARTERED PROFESSIONAL ACCOUNTANTS LTD. ▪ BARBER & HAIME

Moving Expense Worksheet

Who can claim moving expenses?

- 1) You have moved a minimum of 40 kilometers closer to a new place of work (or school). You or your spouse must be starting a new job or relocating your self-employment business.
- 2) You have established a new place to live. (e.g. you sold or rented out your prior residence)

If these conditions do not apply to you, then you do not need to complete this form. If you are not certain, then please contact us and discuss the issue with one of KMA's tax professionals.

1. Personal Identification

	First	Middle	Last
Taxpayer			
Spouse			

2. Previous and New Employer Details

Previous Employer

Name:				
Address:	City:	Prov:	Postal Code:	

New Employer

Name:				
Address:	City:	Prov:	Postal Code:	

Date you or your spouse started the new employment?



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3. Details of your move

Old Address

Address:	City:	Prov:	Postal Code:
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New Address

Address:	City:	Prov:	Postal Code:
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Please complete the following questions

1.	What was the date of your move?	(Date: m/d/y)
2.	When you moved, did you fly or drive to your new residence? YES NO • If you did a combination of flying and driving, please indicate as such	Flew Drove Both
3.	If you flew, did you make one or more trips? YES NO • If YES, please provide details below.	
	First Trip	(Amount \$) (Date: m/d/y) (Reason)
	Second Trip	(Amount \$) (Date: m/d/y) (Reason)
	Third Trip	(Amount \$) (Date: m/d/y) (Reason)
	Fourth Trip	(Amount \$) (Date: m/d/y) (Reason)
4.	If you drove, did you make more than one trip? YES NO • If your answer is YES, please provide the information below	
	First Trip	(Amount \$) (Date: m/d/y) (Reason)
	Second Trip	(Amount \$) (Date: m/d/y) (Reason)
	Third Trip	(Amount \$) (Date: m/d/y) (Reason)
	Fourth Trip	(Date: m/d/y) (Reason)



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4. Moving Expenses

1.	Did you use a moving company? YES NO	
	• If YES, then please provide the details below	
	Name of moving company	
	Amount paid	(Please attach receipt)
2.	If you did not use a mover, then please provide details how you moved your household goods?	
	Amount paid	(Please attach receipt)
3.	How the members of your household moved to the new location?	
4.	How did they arrive at the new residence? (By automobile, flying or other) Please describe.	
5.	Number of days spent travelling. If you made multiple trips, then please include all those days.	
6.	Did you or members of your household stay in hotels, motels, or other accommodations during the move? YES NO	
	• If YES, then please provide the total spent on accommodations (attach receipts please)	(Please attach receipts)
	• If YES, then please provide the total spent on meals	(Please attach receipts)
7.	Did you or members of your household stay in temporary accommodations either before or after the move? YES NO	
	• If YES, please provide the following:	
	Dates of the temporary accommodation	(d/m/y)
8.	Total cost of the temporary accommodation	
	(Please attach receipts)	
8.	Did you incur any costs related to maintaining your old residence for a period of time after the move? YES NO	
9.	• IF YES, please provide a listing of the expenses in the Incidental Moving table below.	
	Did you or your spouse receive reimbursement of moving costs from an employer? YES NO	
	• If YES was the reimbursement included in your or your spouse's T4? YES NO	
9.	• IF YES, please provide the amount of reimbursement.	



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5. Purchase and sale of residence

[illegible]