**2023 Medical Expense Worksheet**

Name: Name:

$

Prescriptions

Dental

Medical Premiums (private health care plans i.e. Blue Cross)

Chiropractor

Optical

Other –

Other –

Other –

Travel –

$

Meals – # of meals x $ 23/meal

Travel – # of km x $ 0.53 /km\*\*

Accommodations

Total Medical Expenses

**Please attach medical receipts and other supporting documents**

**\*\* Please note at the time of printing, CRA has not published the Kilometer rate. Provide us with the # of KM and the accountants will fill in the rate and the totals.**