Medical Expenses

2017 Tax Worksheet

We do not need all your receipts if you complete this worksheet. We only need total amounts per family member, per Payee, and by type of prescription.

Changes you need to know about:

- Please obtain your year end claim summary from your plan provider
- Please obtain your year end summary from Shopper's Drugmart (or the like)

YOUR INFO

Your Name	Tax Year

COMPLETE PREMIUM INFO BELOW, *if applicable*	**Taxpayer**	**Spouse**
Premiums paid to Private Health Service Plans		
Employee-paid premiums for Private Health Service Plan		

EXAMPLES of how to complete the medical expense table

Payment Date	*Patient Name*	*Payment made to*	*Description*	*$$ Out of Pocket*
Jan. 1 / 2017	*Billy Joe*	*AAA Pharmacy*	*Prescriptions*	*$1,000.00 (total for 2017)*
Feb. 7 / 17	*Bobby Ray*	*Pacific Blue Cross – portion NOT reimbursed*	*Eye glasses*	*$ 500.00*

PAYMENT DATE	PATIENT NAME	PAYMENT MADE TO	DESCRIPTION	$$ OUT OF POCKET

Comments / Notes