Check list for NEW clients

The information provided to us is strictly confidential and used only by our office and CRA (where applicable).

PART 1 (Personal Information for family members living in your household)

Personal Information First Name Date of Birth SIN# Address City Home Phone Email address Marital Status Date of Status change		Postal Code: Cell Phone: _	year provide date below)
Spouse First Name SIN# Date of Birth Cell Phone Email address		Last Name 	
Preference for receipt o	f yearly tax letter:		
□ Email Em	ail address:		
Dependant children and/o	or relatives living with you	ม (Provide date if this ch	nanged in current tax year)
Name	Relationship		Date of change (If applicable)
Do you have parents ove and net income)	r 65 that now live with yo	u? (If so, please prov	vide their name, SIN#
Any changes to you or ar without difficulty) If yes, p	nyone in your household' olease explain	s health (i.e. unable to	walk a city block
Do you or anyone in your	household have a disab	ility? If yes, please ex	xplain
Direct deposit information	(Please provide a void	cheque)	
Other changes (Please s	• •		

PART 2 (Checklist)

This following checklist is generic so all the slips or information listed may or may not be required. This checklist is a guide to assist you in remembering what may apply to your situation.

T4 Slips for those earning employment. Ensure you receive a T4 from EVERY place		
worked in the current tax year.		
T4AP slips for Canada Pension		
T4A0AS slip for Old Age Security		
T5 Slips for all financial institutions where you are paid interest		
T3 Slips for any investment companies where you may have mutual funds		
Stock Transactions – All stocks or mutual funds sold regardless of whether they were at		
a loss. Contact your financial advisor to ensure you have all the information required to		
prepare your tax return. See the section titled forms on our website		
Childcare receipts		
Fitness receipts for children under 16 or infirm children or children 18 and under who are		
eligible for the disability amount		
Artistic, developmental, recreational and/or cultural receipts for children under 16 or		
children 18 and under who are eligible for the disability amount		
Tuition receipts for you and/or your dependant children who will be transferring their		
tuition credits to you.		
Medical and dental receipts		
 Don't forget Travel Medical and Residental Care Fees. 		
Rental Income Worksheet. See the section titled forms on our website.		
Small Business Worksheet. See the section titled forms on our website		
Vehicle Worksheet. See the section titled forms on our website		