



CLIENT INTAKE FORM AND TAX PREPARATION

Personal Information

TAXPAYER: Province of residence on December 31st

DOB: **SIN:** **Driv Lic#**

City **Prov:** **Email:** **Phone:**

SPOUSE OR COMMON-LAW: Prov of residence on December 31st

DOB: **SIN:** **Driv Lic#**

City **Prov:** **Email:** **Phone:**

Marital Status:

Married Single Common-law Separated Divorced Widowed

If married or common-law, are you filing jointly with us? Yes No

If your marital status change last year, provide the date:

Residence Status: Canadian Citizen Immigrated Emigrated Permanent Resident

Visiting Student Other specify/provide date:

Employment Status: Employed Sole Proprietor Corporation Retired

Employment Spouse/Common-law: Employed Sole Proprietor Corporation Retired

Elections Canada: Taxpayer: Yes No Spouse/Common-law: Yes No

Financial Situation: Foreign Property Bankruptcy Insolvency Inheritance Other

Dependants: Yes No How many? Do they live with you? Yes No

Name DOB: Relationship: Disability:

Name DOB: Relationship: Disability:

Name DOB: Relationship: Disability:



Income Slips

T4 T4A T4E T5007 Spousal Support Received

Pension Income Slips

T4A T4A(P)
T4A(OAS) T4A-RCA
T4RSP T4RIF Foreign Pension

Investment Income

T3 T5 T4PS T5013
T5008 Foreign Investment Stock Options

Deductions for Investments

Interest for Investment Income Management Fees
Accounting/Legal Fees Eligible Retiring Allowance

CRA Repayment or Considerations

HBP- Home Buyers' Plan LLP- Lifelong Learning Plan
Capital Gains Personal Residence/Cottage



General Deductions for credits (receipts required)

- | | |
|---|---|
| RRSP/PRPP <input type="checkbox"/> | Child Care Exp <input type="checkbox"/> |
| Moving Exp <input type="checkbox"/> | Spousal Support Made <input type="checkbox"/> |
| Employment Exp <input type="checkbox"/> | Signed T2200 <input type="checkbox"/> |
| Medical Exp <input type="checkbox"/> | Charitable Donations <input type="checkbox"/> |
| Rent paid <input type="checkbox"/> | Political Contributions <input type="checkbox"/> |
| Tuition <input type="checkbox"/> | T2200 <input type="checkbox"/> |
| Eligible Teaching Supplies <input type="checkbox"/> | Disability Certificate <input type="checkbox"/> |
| Travel for Medical <input type="checkbox"/> | Home Accessibility for Disability <input type="checkbox"/> |
| First-time Home Buyer <input type="checkbox"/> | Medical Exp for Caregiver Dependants <input type="checkbox"/> |
| Union Dues/Professional Fees <input type="checkbox"/> | Property Taxes <input type="checkbox"/> |
| Northern Resident <input type="checkbox"/> | Union Dues/Professional Fees <input type="checkbox"/> |
| Volunteer Firefighter <input type="checkbox"/> | Search and Rescue Volunteer <input type="checkbox"/> |
| Digital Subscriptions <input type="checkbox"/> | |

Self-Employed or Sole Proprietor Income/Expenses

- | | |
|---|---|
| Gross Sales <input type="checkbox"/> | Statement of Rental Income <input type="checkbox"/> |
| Home Office Expense <input type="checkbox"/> | Business Expense <input type="checkbox"/> |
| Vehicle Mileage Log <input type="checkbox"/> | Vehicle Expense <input type="checkbox"/> |
| Inventory Cost <input type="checkbox"/> | Cost of Borrowing <input type="checkbox"/> |
| CRA Tax Installments <input type="checkbox"/> | Capital Purchase or Sale <input type="checkbox"/> |