

Client Information Sheet

Personal Information

☐ Returning Client - enter only new information

NAME		DATE OF BIRTH	SIN #
		MM/DD/YYYY	
EMAIL	HOME PHONE	CELL PHONE	CANADIAN CITIZEN
			☐ Yes ☐ No
MARITAL STATUS ON DEC. 31 ST : ☐ Single ☐ Married ☐ Common-Law ☐ Separated ☐ Divorced ☐ Widowed			
MARITAL STATUS CHANGED? ☐ Yes ☐ No		OWN \$100,000+ OFFOREIGN PROPERTY? ☐ Yes ☐ No	
PAPERLESS RETURN AND/OR NOA? ☐ Yes ☐ No		SOLD YOUR RESIDENCE DURING TAX YEAR? ☐ Yes ☐ No	

Spouse (if applicable)

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		MM/DD/YYYY	
EMAIL	HOME PHONE	CELL PHONE	CANADIAN CITIZEN
			☐ Yes ☐ No

Address

STREET ADDRESS			PROPERTY TAX PAID	ANNUAL RENT
			\$	\$
CITY	PROVINCE	POSTAL CODE	NAME OF LANDLORD OR MUNICIPALITY	

Dependants

NAME	RELATIONSHIP	DATE OF BIRTH	SIN #
		MM/DD/YYYY	
		MM/DD/YYYY	
		MM/DD/YYYY	
		MM/DD/YYYY	

Applicable Income, Deductions and Credits (check all that apply)

☐ Business Income ☐ Rental Income ☐ Sale of Investments ☐ Sale of Real Estate ☐ Employment Expenses (T2200) ☐ Professional/Union Dues ☐ Legal Fees (employment related)	☐ Legal Fees (support related) ☐ Child Care Expenses ☐ Moving Expenses (work or school) ☐ Spousal Support Received/Paid ☐ RRSP Contributions ☐ Tuition Fees ☐ Student Loan Interest	☐ Caregiver ☐ Disability Tax Credit ☐ Medical Expenses ☐ Charitable or Political Donations ☐ TFSA ☐ _____
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Comments

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