

Income Tax

Client Name: _____ SIN: _____

Date of Birth: _____

Phone: _____ E-Mail: _____

Address: _____

Marital Status: _____

Spouse's Name: _____

Social Insurance Number: _____ Date of Birth: _____

Would _____ Like to provide information to Elections Canada ? Y N

Would _____ Like to provide information to Elections Canada ? Y N

Dependents

Name:	Date of Birth:	Canadian SIN:	USA – ITIN:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What Type of Return(s) does _____ Require?

Canadian GST / HST USA Federal USA Michigan USA Detroit

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Canadian GST / HST USA Federal USA Michigan USA Detroit

Notes:

- Are you interested in a cash back refund, Pending your Eligibility? Y N
- Is a copy of your 2020 and 2021 Notice of Assessments (NOA) Available?
(We use this information for accuracy and any required carried credits Y N
- Did you make any rent or property tax payments in 2021? If so; Y N
Rent / Property Tax paid: \$ _____
Paid to: _____
Number of Months Paid : _____
- Are you required to make payments towards a Lifelong Learning Plan or,
Home Buyers Plan? If so; Y N
Payment: _____ Balance: _____ Years left: _____
- Do you make or receive support payments? If so; Y N
Child support payment Made: _____
Child support payment received: _____
Spousal support payments made: _____
Spousal support payments received: _____
- Do you, or any of your dependents attend any post- secondary courses for which they
paid tuition? Y N
- Have you made any payments towards a student loan in 2020 / 2021? Y N
- Do you, your spouse, or any dependents have or apply for the DTC
(Disability Tax Credit)? Y N
- Do you are for an elderly parent(s)? Y N
- Do you or your dependents have any medical expenses? Y N
- Did you or any dependents need to travel 40KM or more for medical treatment
Or advice? Y N
- Did you buy or sell a home in 2021? Y N
- Did you pay any Union or Professional Association dues? If so; Y N
To: _____ How Much: _____
- Did you subscribe to a news paper or digital News Paper? If so; Y N
Subscription full year amount: _____
Monthly Payment: _____
Number of Months Subscribed: _____
- Did you work from home in 2021? If so; Y N
Days Worked From home: _____