

Personal Tax Checklist



Name:	_____	Email Address:	_____
Your Birthday:	_____	Spouse's Name:	_____
Your SIN:	_____	Spouse's SIN:	_____
Phone Number:	_____	Spouse's Birthday:	_____
Address:	_____	Spouse's Phone:	_____
	_____	Spouse's Email:	_____

Eligible Dependents:				
First and Last Name	Date of Birth	Gender	SIN (If Applicable)	Childcare Expense:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Your Preferred Contact Method:	Investment Broker Name:	_____
<input type="checkbox"/> Phone	Contact Number:	_____
<input type="checkbox"/> Email	Email Address:	_____

Signing Options:

☐ 1) Electronic Signature - All documents will be emailed to you for review and digital signature

☐ 2) In Person - All documents requiring signature will be printed and available at our office for review and signature

Questions	Please Circle Your Answer	
1) Are all individuals listed above Canadian Citizens? If no, which country do they hold citizenship? _____	Yes	No
2) Did you buy or sell any property in the current tax year? (If yes, please provide the details: _____) If yes, are you a first time homebuyer?	Yes	No
3) At any point in the year did you own foreign property (investments, bank accounts, etc.) with a cost over \$100,000 CAD?	Yes	No
4) Do you authorize CRA to provide your personal information to Elections Canada? (Name, Address, Date of Birth and Citizenship)	Yes	No
5) Have you included all of your tax information that you are expecting to receive? In No, what is outstanding: _____	Yes	No
6) Did you make any political or charitable donations?	Yes	No
7) Did you make any RRSP contributions?	Yes	No
8) Did you incur deductible employment expenses? (Please provide T2200 from your employer)	Yes	No
9) Are you or one of your dependents eligible for the disability tax credit?	Yes	No
10) Do you earn any self employment income in the calendar year? (If yes, please provide your acci	Yes	No
10) Additional information: _____		