

Client Information for an Existing Client

Date received:

Log in Number (office use only):

Company name(if corporate client)

Phone # (best # to call during the evening):

Name:

Phone # (best # to call during the day):

e-mail address:

Address (*only if you have moved in the last two years*)

Phone #(H):

(B):

(C)

Fax #:

Fill out the following only for items that have changed since the previous taxation year

Marital status:

Spouse name:

Date of Birth:

SIN #:

Dependant/ Children's name(s):

Dependant / Children's date of birth:

Dependant / Children's SIN if available:

Any special information that we should be aware of:(new, changed, discontinued and/or unusual items)

Outstanding questions (for office use only) - Please note that return will not be started if missing data

Incomplete information needed:

=> PLEASE TURN OVER



TAX RETURN INTAKE AND TRACKING

PLEASE CHECK SLIPS PROVIDED

T3 (MUTUAL FUNDS)	
T4 (SALARY)	
T5 (INTEREST, DIVIDENDS)	
T5013 (LIMITED PARTNERSHIPS)	
T4A (P) (CPP)	
T4A (OAS) (OLD AGE)	
RRSP (purchase and withdrawals)	
RIF (withdrawals)	

PLEASE CHECK OTHER SOURCES OF INCOME

RENTAL INCOME	
BUSINESS INCOME	
STOCK TRADING (if trading summary is not included, it is important that you contact your broker to obtain this)	
HAS AN EXPENSE SUMMARY BEEN PREPARED BY YOU?	
DO YOU REQUIRE BOOKKEEPING ASSISTANCE FROM OUR FIRM?	
SPECIAL INSTRUCTIONS	