

PERSONAL INCOME TAX CHECKLIST

YEAR:	SOCIAL INSURANCE NO
NAME:	BIRTHDATE:
ADDRESS:	(Number, Street, PO Box)
CITY:	PROV POSTAL CODE
EMAIL:	TELEPHONE:
	(married, single, separated, divorced)
DATE OF MARITAL STATUS CHANGE:	
SPOUSE'S NAME:	SOCIAL INSURANCE NO
	SPOUSE'S BIRTHDATE:
CHANGES IN DEPENDENTS:	
Name Date of Birth SIN	Relationship Income Info is enclosed
BUSINESS AND PROPERTY INCOME	k
Started a new business	Ceased operating a business
Started a new business Have attached my business returns for you to	Ceased operating a business o complete: GST
Have attached my business returns for you to	
Have attached my business returns for you to Have enclosed details of rental property inco	o complete: GST me No changes in properties owned
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Did you own foreign property with a value in excess of \$100,000 Canadian? Yes _____ No _____

Did you sell your principal residence during the tax year? Yes _____ No _____