

CLIENT FORM

2019 TAX RETURN

Client: _____ Date: ____ / ____ 2020 10\$ extra charge for multiple PDF

My personal details, my family situation and my insurance cover are the same as last year.
(If you have checked the box, proceed to section 2)

SECTION #1

<p>Address: _____</p> <p>Apt # : _____</p> <p>S.I.N.: _____</p> <p>D.O.B.: _____</p> <p>Home : () _____ - _____</p> <p>Mobile: () _____ - _____</p> <p>Office: () _____ - _____</p> <p>e-mail: _____</p>	<p>Spouse name: _____</p> <p>If we don't file your partner's taxes:</p> <p>Line 236 Federal : _____</p> <p>Line 275 Provincial : _____</p> <p>S.I.N.: _____</p> <p>D.O.B.: _____</p>																
<p>Web site: _____</p>																	
<p>Civil status as at Dec. 31 2019 : <input type="checkbox"/> Married <input type="checkbox"/> Living common-law <input type="checkbox"/> Single <input type="checkbox"/> Widower(widow) <input type="checkbox"/> Separated/divorced</p> <p>Did your civil status changed in 2019: <input type="checkbox"/> Yes <input type="checkbox"/> Non Date of change * : _____ / _____ / 2019</p> <p style="text-align: center; font-size: small;">* If separated, details of ex-spouse</p>																	
<p>Dependents information</p> <table style="width: 100%; border-collapse: collapse; font-size: small;"> <thead> <tr> <th style="width: 35%;">Child's name</th> <th style="width: 20%;">Date of birth</th> <th style="width: 20%;">S.I.N.</th> <th style="width: 25%;">Post-secondary student</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>____/____/____</td> <td>____ - ____ - ____</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td>_____</td> <td>____/____/____</td> <td>____ - ____ - ____</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td>_____</td> <td>____/____/____</td> <td>____ - ____ - ____</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> </tbody> </table>		Child's name	Date of birth	S.I.N.	Post-secondary student	_____	____/____/____	____ - ____ - ____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	____/____/____	____ - ____ - ____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	____/____/____	____ - ____ - ____	<input type="checkbox"/> Yes <input type="checkbox"/> No
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_____	____/____/____	____ - ____ - ____	<input type="checkbox"/> Yes <input type="checkbox"/> No														
<p>Do you have shared custody ? <input type="checkbox"/> Yes <input type="checkbox"/> No → If so, what % and for which children _____ %</p> <p style="text-align: center;">Which parent is liable to pay support payments? <input type="checkbox"/> Dad <input type="checkbox"/> Mom</p>																	
<p>Insurance plan is covered by <input type="checkbox"/> Private (<input type="checkbox"/> Own <input type="checkbox"/> Spousal) / <input type="checkbox"/> RAMQ - months that apply ? _____</p> <p style="text-align: center;"><input type="checkbox"/> Extended Health benefit</p>																	
<p>Instalments : Federal : _____ \$ Provincial : _____ \$</p>																	

SECTION #2

Confirmations of taxpayer relatively to disposition or deemed disposition of a real property in 2019

N.B.: Check appropriate box for each confirmations below. A real property includes a house, land, a condo, a cottage, a mobile home, etc...

	Correct	Incorrect
° In 2019, I haven't sold, willed or given a real property in 2019 to a family member or a stranger.	<input type="checkbox"/>	<input type="checkbox"/>
° In 2019, I haven't started to rent, to a family member or a stranger, a real property that I used before for personal purposes.	<input type="checkbox"/>	<input type="checkbox"/>
° In 2019, I haven't started to use for personal purposes, a real property that I rented before that moment to a family member or a stranger.	<input type="checkbox"/>	<input type="checkbox"/>
° In 2019, I haven't consented a right of way or an easement on a land I own to a family member or a stranger.	<input type="checkbox"/>	<input type="checkbox"/>

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SECTION #3

General

- ° Do you or a family member have a severe impairment or a disability?
(if so, do you have the forms filled out : T2201 and TP-752.0.14) ? Yes No
- ° Did you pay any interest fees on student loans? Yes No

Home assistance

- ° I lived alone during the whole year of 2019 (Excluding dependent persons)? Yes No
- ° If you are a tenant or subtenant, did you receive a RL31 ? Yes No
- ° During 2019, have you moved to get closer to your place of work (more than 40km)? Yes No
- ° Have you contributed to your HBP (Home buyers plan) this year? Yes No
- ° Did you purchase a qualifying (first) home in 2019 to use as a principal residence? Yes No
- ° Did you do eco-friendly renovations in your house (RénoVert, Flooding, Waste water)? Yes No
- Year of construction : _____ Description of property : House Condo
- ° Did you pay for home support services (disabled person or over 65 years old) ? Yes No

Investments

- ° Have you sell any shares or mutual funds (outside of RRSP) during the year ? Yes No
- ° Did you take any RRSP in 2019 or in the the first 60 days of 2020? (including monthly withdrawal) Yes No
- ° Did you own or hold specified foreign property where the total cost amount is more than CAN\$100K ? Yes No

Family

- ° Have you hosted one of your parents or are you a natural caregiver? Yes No
- ° Have you incurred costs related to infertility treatment or for adoption ? Yes No
- ° Did you receive a children's Fitness Tax Credit/ children's art tax credit (child under 16)? Yes No

70 years and more

- ° If you are 70 y/o and more, did you pay for snowremoval, lawn and household ? Yes No
- ° Do you have receipts for seniors' activities (must be 70 y/o or more as at 12/31/19)? Yes No
- ° Did you pay over \$250 for a hospital bed, an hearing aid or a wheelchair, etc. Yes No

FOR NEW CLIENTS ONLY

Who referred you to us ? : _____

Do you have a company ? yes no

If yes, please indicate its name : _____

Please note that the basic amount for the filing of the 2019 tax return has increased by \$3/person.

Return of documents : Mail (\$8 fees) will pass by the office

Additional fees will be charged if we are required to bring corrections to your tax return for any missing informations.

I hereby confirm the validity of the informations and documents that I have given you and I'm able to take ownership of the missing and/or incorrect informations.

I am aware that I'm responsible of the penalties incurred if not all my income is reported.

Client's signature _____ Date _____