

J&L Income Tax & Accounting

Client Intake Form

Tax Preparers Name _____

DT Max _____

Contact Information

First Name _____ HOH _____

Last Name _____

Date of Birth _____

Email _____

Phone # _____

Single _____ Married _____ Separated _____ Divorced _____

Date if Separated/Divorced _____

Court Order on File _____

Number of Dependents under 18 _____

Eligible Dependent? Yes _____ No _____

E-file without CRA/Authorization _____

Please review Tax Documents & Worksheets for accuracy.

Advanced Workers Benefit _____

RRSP Contributions _____

Number of T4(s) _____

Number of T4A(s) _____

Number of T4E(s) _____

Number of T4RSP(s) _____

Number of T4RIF(s) _____

T5(s) _____

T3(s) _____

T5013(s) _____

OAS _____

CPP _____

T5007 _____

SA Yes ____ No ____

WSIB Yes ____ No ____

Rent _____

Property Tax _____

Do we file your GST for Business Yes ____ No ____

Split Income Yes ____ No ____

Disability on file Yes ____ No ____

Medical Expenses _____

Charitable Donations _____

Tuition and Tuition Carry Forward Yes ____ No ____

Union Dues _____

Spousal Support _____

Other deductions/income _____

Other deductions/income _____

By signing this document, I am confirming that my income tax is accurate and correct to the best of my ability. J&L Income Tax & Accounting is not responsible for any missing slips not stated on this document and relies on the client and AFR to provide all documentation.

To ensure accuracy and a complete review of your taxes and tax situation, please provide us with a copy of your latest Notice of Assessment and or Reassessment from CRA.

Date

Signature