Island Tax & Bookkeeping Personal Tax Return Check List					DATE: New Client	Yes or No
1 Personal Information						
	Name(s)			SIN	Date of Birth	Phone
					YYYY/MM/DD	Preferred
					YYYY/MM/DD	Alternate
	NA	Chatana Cinada Na		<u> </u>	Constant Mideral	Accinate
Martial Status: Single Married Common-Law Divorced Separated Widowed Has marital status changed in the tax year? If yes, please provide date:						
Address:						
Email						
2	Residence					
Province or territory of residence on December 31 for tax filing year						
Did the taxpayer immigrate to o	yes or no					
NEW!!						
Did the taxpayer sell their principal residence during the tax year? Address of sold house: yes or no						
If Yes: What year did you originally buy the residence?						
If Yes: What was the sale price of the residence?						
If Yes: Did you co-own the home with someone else? Who?						
If Yes: Was the residence your ONLY primary principal residence the entire time? Did you ever rent out the residence?						
Did you ever rent out the resid	ence:					
3	Elections Canad	a				
Is the taxpayer a Canadian citize	en?					yes or no
If yes, do you authorize CRA to	update your addr	ess with National Re	egister of	Electors?		yes or no
4	Foreign Reporti	ng				
		-	ost of mou	ro than \$100 0002		voc or no
Did the taxpayer own or hold for Including Bank Accounts and Inv					eign income earned.	yes or no
5	Dependents					
Name	Relationship	Date of Birth	Income	SIN	Trans	fer Tuition? Other?
		MM/DD/YYYY				
	+	MM/DD/YYYY MM/DD/YYYY				
6 Pension						
Does the taxpayer elect to split eligible pension income with spouse?						yes or no
Foreign pension income? Please provide details						yes or no
Foreign tax paid? Please provide details yes or no						
7 Self Employment/ Rental Income						
Do you have self employment income ?						yes or no
Does a GST return need to be filed for your proprietorship?						yes or no
Do you have rental income?						yes or no
8 CERTIFICATION I CERTIFY THAT THE INFORMATION GIVEN ON THIS FORM AND DOCUMENTS INCLUDED,						
IS, TO THE BEST OF MY KNOWL			OWILIVIS	iiveeobeb,		
I HAVE OBTAINED THE CONSENT OF MY SPOUSE AND OR DEPENDENTS IF APPLICABLE TO PREPARE TAX RETURNS						
X						
9	Client Notes/Co	omments				
PLEASE LET US KNOW ABOUT ANY CHANGES, QUESTIONS OR CONCERNS						
If you would like to set up direct deposit, or change banking information, please include a void cheque. yes or no						
			In	ternal Use Only		
Client Phoned:				,	New Clients - Signed A	auth.? Auto Fill Complete?
Cheffer Hoffed.					INCAN CHICKES - SIRTIEU P	Auto Fili Complete?
Notes:						