

Client Drop Off Questionnaire (One per Couple)

Please complete the following form to accompany your income tax documentation submission:

| PART A: CLIENT AND SPOUSE INFORMATION: | | | | | | |
|--|--|--------------------------|------------------------------|--|------------------------|-----------------|
| Client | | | Spouse | | | |
| First Name | | | | | | |
| Last Name | | | | | | |
| Date of Birth | YYYY/MM/DD | | | YYYY/MM/DD | | |
| Telephone | Home: () Cell: () Work: () | | | Home: () Cell: () Work: () | | |
| Email Address | | | | | | |
| Do you have a Disability Tax Credit already approved by CRA? (Form T2201 completed by your doctor) | | | | | | |
| Yes <input type="checkbox"/> | | | Yes <input type="checkbox"/> | | | |
| No <input type="checkbox"/> | | | No <input type="checkbox"/> | | | |
| Marital Status as of Dec 31: | | | | | | |
| <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Common Law <input type="checkbox"/> Widowed | | | | | | |
| If your marital status changed in the year, please provide the date: YYYY/MM/DD | | | | | | |
| If we are only preparing your return and not your spouse's, please provide your spouse's net income: \$ _____ | | | | | | |
| Mailing Address: | | | | | | |
| Unit #: _____ Street Number: _____ Street Name: _____ | | | | | | |
| City _____ Province _____ Postal Code _____ | | | | | | |
| PART B: CHILDREN AND OTHER DEPENDENT INFORMATION*: | | | | | | |
| * Please be sure to complete a <u>separate</u> questionnaire for any dependent children if we are preparing their return(s) | | | | | | |
| + If you are a single parent and intend to claim the Eligible Dependent credit, you <u>must</u> provide your dependent's net income | | | | | | |
| Last Name | First Name | Date of Birth (YY/MM/DD) | Relationship | Net Income ⁺ | Post-Secondary Student | Disabled/Infirm |
| | | | | | Y / N | Y / N |
| | | | | | Y / N | Y / N |
| | | | | | Y / N | Y / N |
| | | | | | Y / N | Y / N |
| PART C: MANDATORY QUESTIONS: | | | | | | |
| 1. Did Tax-Pertise Services prepare your income tax return in the past? Yes (2022) ____ Yes (Not 2022; provide year) ____ No ____ | | | | | | |
| 2. Do you own more than \$100,000 CAD of <u>foreign</u> property? Yes ____ No ____ | | | | | | |
| 3. Did you sell your principal residence or any other property in the year? Yes ____ No ____ *If yes, please complete Part F on the reverse (mandatory information) | | | | | | |
| 4. Are any of the taxpayers or dependents listed above deceased? Yes ____ No ____ *If yes, please include a copy of the will and death certificate | | | | | | |
| 5. Are you missing any documentation today? Yes ____ No ____ * If yes, please provide details in the Additional Information section on the reverse of this form | | | | | | |
| PART D: PROVIDE BEST CONTACT: | | | | | | |
| Please indicate the best phone number to reach you: | | | | | | |

PART E: MEDICAL EXPENSES

If applicable, please list the total out of pocket expenses paid for each family member in the calendar year. Do NOT include any amounts reimbursed by your insurance plan(s). **Please retain all medical receipts in your files at home; do not drop these to our office.**

| FAMILY MEMBER NAME | TOTAL (\$): |
|--------------------|-------------|
| | |
| | |
| | |
| | |

PART F: SALE OF PRINCIPAL RESIDENCE (IF APPLICABLE)

If you sold your principal residence in the tax year, please provide us with ALL of the following information (mandatory):

- Note that in most cases, you will not pay for capital gains on the sale of your principal residence, however, failure to report this information to CRA can result in penalties
- If you sold a property that was not your principal residence, please provide the information in Part G below

1. Address of the property that was sold:

Unit #: _____ Street Number: _____ Street Name: _____
City _____ Province _____ Postal Code _____

2. Names and ownership percentages of all owners:

| NAME | OWNERSHIP % |
|------|-------------|
| | |
| | |
| | |

3. The year that you purchased this property:

4. Sale price of the property before expenses:

PART G: PLEASE USE THIS SECTION FOR ANY ADDITIONAL INFORMATION THAT YOU WOULD LIKE TO PROVIDE:

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* Please also provide your signed Authorization form (complete all highlighted fields) should you choose to take advantage of this service, which allows us to access your account with Canada Revenue Agency. If you have signed this for us in the past, you do not need to do so again.