



Information Return for Electronic Filing of an Individual's Income Tax and Benefit Return

Tax year: _____

The information on this form relates to the tax year shown in the top right corner. Before you fill out this form, read the information and instructions on **page 2**. The individual identified in **Part A** (or the individual's legal representative) must sign **Part F**. Your electronic filer must fill out **Part C** and **Part D** before submitting your return. Give the signed original of this form to your electronic filer and keep a copy for yourself.

Part A – Identification and address as shown on your tax return (mandatory)																	
First name		Last name		Social insurance number													
Mailing address: Apt number – Street number - Street name		PO Box	RR	City	Postal code												
Get your CRA mail electronically delivered in My Account (optional)																	
Email Address: _____																	
By giving an email address, I am registering to receive email notifications from the CRA and agreeing to the terms of use on page 2 .																	
Part B – Declaration of amounts from your Income Tax and Benefit Return (mandatory)																	
Enter the following amounts from your return, if applicable:																	
Total income (line 15000) _____		Refund (line 48400) _____															
Taxable income (line 26000) _____		or															
Total federal non-refundable tax credits (line 35000) _____		Balance owing (line 48500) _____															
Part C – Electronic filer identification (mandatory)																	
By signing Part F below, I declare that the following person or firm is electronically filing the new or the amended Income Tax and Benefit Return of the person named in Part A . Part F must be signed before the return is electronically transmitted.																	
Name of person or firm: _____			Electronic filer number: _____														
Part D – Document Control number (mandatory)																	
The document control number generated for my electronic record: _____																	
Part E - How do you want to receive your notices of assessment and reassessment? (select one or more of the following electronic options)																	
<input type="checkbox"/> I am registering (as indicated in Part A above) or I am already registered to receive email notifications from the CRA and can view and access my notices of assessment and reassessment online.																	
<input type="checkbox"/> I would like my electronic filer to receive a one time notice of assessment and reassessment electronically in their software and provide me with a copy. I understand that by ticking (✓) this box, I am allowing the CRA to electronically provide my assessment results and my notices of assessment and reassessment to the electronic filer (including a discounter) named in Part C . I will now receive a copy of my notices of assessment and reassessment from my electronic filer. For more information, see the Express NOA section on page 2 .																	
OR																	
<input type="checkbox"/> I would like to receive paper notices of assessment and reassessment through Canada Post. I will receive my notices of assessment and reassessment through Canada Post once my return or amended return has been assessed. If I have already registered to receive email notifications from the CRA and I tick this box, I understand that I will not receive a copy of my notice through Canada Post.																	
Part F – Declaration and authorization (mandatory)																	
I declare that the information entered in parts A , B and C is correct and complete and fully discloses my income from all sources. I also declare that I have read the information on page 2 , and that the electronic filer identified in Part C is filing my return. I allow this electronic filer to communicate with the CRA to correct any errors or omissions.																	
_____ Signature (individual identified in Part A or legal representative)			_____ Name and title of legal representative														
			<table style="margin: auto;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> <tr> <td style="text-align: center;">Year</td> <td style="text-align: center;">Month</td> <td style="text-align: center;">Day</td> <td style="text-align: center;">HH</td> <td style="text-align: center;">MM</td> <td style="text-align: center;">SS</td> </tr> </table>									Year	Month	Day	HH	MM	SS
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