| Information we are waiting for: | Questions: | |
|--|------------------------|--|
| | | |
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| | | |
| Client Informatio | on - 2018 TAX YEAR | |
| Best e-mail for FTS to contact your | r family | |
| Date & Time in: | How late can MTS call? | |
| 1013 signedyes / No | T183 signedYes / No | |
| Name | | |
| Is your address the same as last year? | Yes / No | |

| Date & Time in: | | How late can | MTS call? | |
|---|------------------------|-----------------------------|-------------------------|--|
| 1013 signed | _yes / No | T183 signed_ | Yes | 'No |
| Name | | | | |
| Is your address the same a | as last year? | | | Yes / No |
| Address If different: | | | | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> |
| Male D.O.B | | Female DOB | | |
| Ph.(hm) | (wk/cell His | s) | (wk/cell Hers) | |
| Marital Status as of 31 De | c. 2018 | if marital status chan | ged, date of change_ | |
| If changed to CL date you | ı moved in togethe | or?i | · | |
| On. Rent(Rec.Req.) | address if dif. fron | n above, & landlord | | |
| Prop.Tax(actual amnt. reg |) | | | |
| Approx Inc. of Spouse(if n | not filing here) \$ | Name: | <i>\$IN</i> : | |
| Dependents living wi | | | | |
| | - | | | • |
| | | DOB | | |
| | | DOB | | |
| | | DOB | M F Income _ | |
| Do you authorize pension | splitting if either | of you collect a pensi | on? | Yes / No |
| Were any healthy home | es renos. done fo | r srs.(over 65) | · | _Yes / No |
| Do you or anyone in your member must be depended diabetes, mental functions | nt on you for food | , clothing or shelter. | Disabilities incl. lear | ning, |
| Any childcare expenses | s, incl. day camp | o:(name & address | of sitter req.) | _Yes / No |
| Any RSP contributions? (| RSP's in 1st 60 days o | of this year must be claime | ed on this tax return?) | Yes / No |
| Did you move at least 4 | 10kms closer to | a new place of emp | oloyment?(R.R.) | _Yes / No |
| | | | | |
| | | | | |

| Did you pay or receive spousal support:(R.R.) | _Yes / No |
|--|----------------------|
| If yes we need the break down for - Spousal\$Child \$ | |
| Any capital gains to report:(i.e. did you sell a 2 nd property or stocks?) | Yes / No |
| Did you sell your primary res. in 2018?If yes; year purchased, price sold for | Yes / No |
| Is anyone a volunteer as either a firefighter or search & rescue person? | Yes / No |
| Are you a first time home buyer? | _Yes / No |
| Any tuition paid for yourself or transferred from a dependents: If yes were you reimbursed for any of this tuition? | |
| Any med. Exp. (including premiums) totaling over 3% of income:(R.R) | Yes / No Yes / No |
| Do you have charitable donations? | _Yes / No |
| Any public transit passes–must be 65 as of 1Jan. 2018. | _Yes / No |
| Did you pay any interest on any student or investment loans: | _ Yes / No |
| Union or Professional dues:(R.R.) | Yes / No |
| Self Employed?(if new or any changes from last year, go through bus. sheet If self employed: are you HST reg. | |
| any income from web page MTS ***Did you opt into paying El | |
| M 15 *** Did you opt into paying El | _162 / NO |
| Rental Income:(if new or any changes from last year, go through rental sheet) | Yes / No |
| Employment Exp.: (teaching supplies for teachers now qualify) | Yes / No |
| If Yes for employment expenses, T2200 signed: | Yes / No |
| OK to give name, address & DOB to Elections Canada: | Yes / No |
| Foreign investments worth over CAD \$100,000 | Yes / No |
| Are you Canadian Citizens | _Yes / No |
| Have you spent any extended periods of time in the US in past 3 yrs? | Yes / No |
| Any other income to report that's not included above(1013 if not sure) | Yes / No |
| If you have D.D. with CRA is your banking info. the same as last year? | Yes / No |