

Information we are waiting for:

Questions:

Client Information - 2020 TAX YEAR

Date & Time in: _____ How late can MTS call? _____

1013 signed __yes / No

T183 signed _Yes / No

Name _____

Is your address the same as last year? Yes / No

Address If different: _____

Best e-mail to contact your family _____

Male D.O.B. _____ Female DOB _____

Ph.(hm) _____ (wk./cell His) _____ (wk./cell Hers) _____

Marital Status as of 31 Dec. 2020 _____ if marital status changed, date of change _____

If changed to CL date you moved in together? _____

On. Rent (Rec.Req.) _____ address if dif. from above, & landlord _____

Prop. Tax (actual amount. req) _____

Approx. Inc. of Spouse (if not filing here) \$ _____ Name: _____ SIN: _____

Dependents living with you:

_____ DOB _____ M \ F Income _____
_____ DOB _____ M \ F Income _____
_____ DOB _____ M \ F Income _____

Do you authorize pension splitting if either of you collect a pension? _____ Yes / No

Were any healthy homes renos. done for seniors. (over 65) _____ Yes / No

Do you or anyone in your family have any type of mental or physical impairment? Family member must be dependent on you for food, clothing, or shelter. Disabilities incl. learning, diabetes, mental functions, speaking, hearing, vision etc.: _____ Yes / No

Any childcare expenses, incl. day camp:(name & address of sitter req.) _____ Yes / No

Any RSP contributions? (RSP's in 1st 60 days must be claimed on this tax return?) _____ Yes / No

Did you move at least 40kms closer to a new place of employment? _____ Yes / No

Did you pay or receive spousal support: _____	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 2020? 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 dependent: _____	Yes / No
If yes were you reimbursed for any of this tuition? _____	Yes / No
Any med. Exp. (including premiums) totaling over 3% of income:(R.R) _____	Yes / No
If yes reimbursed for any of it? _____	Yes / No
Do you have charitable donations? _____	Yes / No
Any public transit passes—must be 65 as of 1Jan. 2019. _____	Yes / No
Did you subscribe to a Digital News Subscription in 2020:	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) __	Yes / No
If self-employed: are you HST reg. _____	Yes / No
any income from web page _____	Yes / No
MTS ***Did you opt into paying EI _____	Yes / No
Rental Income:(if new or any changes from last year, go through rental sheet) _____	Yes / No
Did you work from home due to COVID-19 19:	Yes / No
If Yes, please provide the number of days you worked from home. _____	
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
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