



ELECTRONIC OR PAPER DELIVERY (PLEASE CHOOSE ONE)

- E-DELIVERY** Please send my tax returns securely via **e-Delivery** to the **email** address or **Sharefile**. (I understand that I will not receive a paper copy of my tax returns and that my original supporting documents will be shredded. An electronic copy of these documents will be included with my tax. No fee)
- PAPPER DELIVERY \$15.00/copy** I will pick up the **paper copy** and my tax slips from the office. Charge me \$15.00 for each printing copy.

PERSONAL INFORMATION

Name:	SIN:	Date of Birth: YYYY / MM / DD
Spouse Name:	SIN:	Date of Birth: YYYY / MM / DD

Address:

Tel:	Email:	Martial Status	<input type="checkbox"/> Married <input type="checkbox"/> Common Law <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Separated
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Do you own foreign property with aggregate cost \$100,000 Canadian Yes No (If yes, complete T1135 checklist on our website)

Canadian Citizen Permanent Resident Non-Resident New Immigrant, **Canada Arrival Date:**

Do any of your family members qualify for the disability tax credit T2201 Yes No (Provide CRA approvals letter copy)

MINOR, INFIRM, OR ELDERLY DEPENDANTS INFORMATION Date of Birth YYYY/MM/DD Net Income; if any

NAME	SIN	Date of Birth	Net Income
	- -		\$
	- -		\$

INCOME	INCLUDED	SLIPS REQUIRED
Salaries, Commissions, Gratuities, Foreign employment income	<input type="checkbox"/>	T4, T4A Slips, and/or Foreign income country name
Pension income (CPP / OAS / RRSP / RRIF / Foreign Pension)	<input type="checkbox"/>	T4A, T4AP, T4A(OAS), T4RSP, T4RIF
Employment insurance (EI), Covid19 benefits	<input type="checkbox"/>	T4E, T4A
Investment Income	<input type="checkbox"/>	T3, T5, OTHER
Partnership Income	<input type="checkbox"/>	T5013 or Details
Self-Employment Income (Business, Commission, Contractor)	<input type="checkbox"/>	Complete Table #3, #4, #5 OR The separate form see website
Rental Income and Expenses	<input type="checkbox"/>	Complete Table #2 OR The separate form see on website
Taxable Capital Gain or Losses	<input type="checkbox"/>	T5008 slip, Realized capital gain/loss summary from broker
Spousal Support Payment Made	<input type="checkbox"/>	Details (spouse name, SIN and address)
Sale of Principal Residence (Reply to this Yes or No)	<input type="checkbox"/>	Purchase Year, Sale Date and Proceed **Election Required**
Change in use of principal residence to Rental and Vice Versa IMP	<input type="checkbox"/>	Details **Election Required** (Separate Filing is Required)

DEDUCTIONS	INCLUDED	SLIPS REQUIRED
RRSP Contribution	<input type="checkbox"/>	Official RRSP contribution receipts
Moving Expenses	<input type="checkbox"/>	Details of expense
Spousal Support	<input type="checkbox"/>	Name, address, payee, amount paid
Interest Expenses, Investment Expenses, Carrying Charges	<input type="checkbox"/>	Details of expenses
DayCare Expenses	<input type="checkbox"/>	Caregiver name, SIN, Total paid (receipts)
Employment Expenses	<input type="checkbox"/>	Copy of T2200 signed by employer and complete Table # 1
Donations	<input type="checkbox"/>	Official receipts
Caregiver and Home Accessibility For Seniors/Disabled	<input type="checkbox"/>	Details and renovation summary with amount paid
Medical, Dental, Physio, Eye Glasses Expenses	<input type="checkbox"/>	Summary or statement from pharmacy
Interest Paid on Student Loan	<input type="checkbox"/>	Official receipt
Digital News Subscription Expenses	<input type="checkbox"/>	Receipt or email copy or summary

EMPLOYMENT EXPENSES (TABLE # 1) Signed T2200 from your employer is required. Complete the table, original receipts are not required. Keep them for 7 years.

Accounting and Legal	\$	Parking	\$
Advertising and Promotion	\$	Supplies, Postage, office	\$
Automobile	Complete Table # 4	Tools	\$
Lodging	\$	Other	\$
Meals (report 100%)		Apprenticeship Level Passed	

RENTAL INCOME (TABLE # 2) Original receipts are not required by CNC, keep them for 7 years. In the case of multiple properties, see a dedicated rental income schedule on CNC website. Cncpa.ca

Property Address:		Owner Name	SIN
Co - Owner name	SIN	Gross Rental Income	\$
Advertising	\$	Insurance	\$
Mortgage Interest	\$	Repairs & Maintenance	\$
Property Taxes	\$	Utilities + Heat + Hydro	\$
Renovations	\$	Strata + management fee	\$

SELF-EMPLOYMENT/BUSINESS/PROFESSIONAL INCOME/CONTRACTOR (TABLE # 3) Original receipts are not required by CNC. Keep them for 7 years.

Register for GST	<input type="checkbox"/> Yes <input type="checkbox"/> No	Want CNC to Prepare GST	<input type="checkbox"/> Yes <input type="checkbox"/> No
GST Number		Are all numbers GST inclusive	<input type="checkbox"/> Yes <input type="checkbox"/> No
SALE / REVENUE	\$	Advertising expense	\$
Meals expense (100%)	\$	Business license/membership	\$
Office expense, supplies	\$	Office rent (NOT home office)	\$
Repairs and maintenance	\$	Salaries & Wages	\$
Travel	\$	Insurance	\$
Bank charges	\$	Automobile	COMPLETE TABLE # 4
Utilities and Property taxes	\$	All Other expenses	\$

AUTO EXPENSES (TABLE # 4) Original receipts are not required by CNC. Keep them for 7 years.

Bought a new vehicle last year	<input type="checkbox"/> Yes <input type="checkbox"/> No	Lease a new vehicle last year	<input type="checkbox"/> Yes <input type="checkbox"/> No
Purchase documents included	<input type="checkbox"/> Yes <input type="checkbox"/> No	Lease documents included	<input type="checkbox"/> Yes <input type="checkbox"/> No
Fuel	\$	Insurance	\$
Repairs & maintenance	\$	Leasing cost (entire year)	\$
Business KM driven last year		Total KM driven last year	

HOME OFFICE EXPENSES (TABLE # 5) Original receipts are not required by CNC. Keep them for 7 years.

Office SQ FT		Total Home SQ FT	
BC Hydro	\$	Fortis	\$
Insurance	\$	Mortgage Interest Only	\$
Home Rent	\$	Property Taxes	\$
Maintenance	\$	Utilities (Water & Sewer)	\$
Other	\$	Other	\$