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| TAX CHECKLIST   |  |  |   |             |  |   | SPO               |
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| INCOMETA  | AXTIPS HELP SAVE YOU   | MONEY! EASY WO   | ORKSHEETS &   | tax TII     | PS AVAILABLE AT WW   | VW.BPTAX.CA   | SPOUSE, LAST NAME |
| Current Address:  |  |  |   |             |  |   |                   |
| Please confirm that this address is correct:  If your address has changed, your new mailing address is: |  |  |   |             |  |   |                   |
|   | as of Dec. 31st:  MM / DD / YEAR   |  |   |             | ☐ Divorced ☐ Separ   | ated 🛭 Single                                       |                   |
|   | Dependant  | Dependant  | Dependant   |             | Dependant  | Dependant   | SP                |
| Full Name:  |  |  |   |             |  |   | SPOUSE            |
| Date of Birth:  | MM / DD / YEAR   | MM / DD / YEAR   | MM / DD / YEAR MM / DD / YEAR MM / DD / YEAR  |             |  |   |                   |
| Have you s  | sold your Principal  | Residence this   | s year? [   | ] Yes       | □ No   |   | FIRST NAME        |
| Total Property  | Taxes: \$  |  | Total R   | lent :      | \$   |   |                   |
| Total Medical   | Expenses: \$   |  |   |             |  |   |                   |
| Total Charitab  | le Donations: \$   |  |   |             | IERE IS AN EXTRA CH<br>/E HAVE TO TOTAL RE   |   |                   |
| LISTED B  | ELOW ARE ALL THE REC   | EIPTS/SLIPS/DO   | CUMENTS WE  | NEED        | TO PREPARE YOUR TA   | AX RETURN.  |                   |
| Т   | SLIPS REQUIRED TO SU   | IBMIT  |   | ٦           | TAX WORKSHEETS   |   |                   |
| T4A OTHER IN<br>T3TRUST INC<br>T5 INVESTME<br>T4AP CANADA   | MENT INSURANCE ICOME OME NT INCOME A PENSION PLAN LD AGE SECURITY  |  | CHARITABLE DONATIONS  MEDICAL RECEIPTS PROPERTYTAX / RENT RECEIPTS WORKSHEET RRSP CONTRIBUTIONS CHILDCARE RECEIPTS WORKSHEET SPOUSAL SUPPORT PAYMENTS CAREGIVER AMOUNT WORKSHEET CAPITAL GAINS/LOSSES WORKSHEET |             |  |   |                   |
| T4RSP RRSP I  |  | TaxTip   | UNION & PROFESSIONAL DUES WORKSHEET MOVING EXPENSES WORKSHEET   |             |  |   |                   |
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FILE#

EMAIL
Please confirm that this e-mail address is correct

If it has changed, your new e-mail is: