## Name

Address $\qquad$
Phone Number
Email
$\qquad$

Preferred Method of Correspondence: $\quad \square$ Mail $\square$ Email

| Children's Names | Birthdates | Relationship |
| :--- | :--- | :--- |
|  |  |  |
|  |  |  |
|  |  |  |

Check off the following that pertain to you

## INCOME

$\square$ T4-Employment income
$\square$ T4OAS - Old age security
$\square$ T4AP - CPP benefits
$\square$ T4A - Other pensions and annuities
$\square$ T4RSP/T4RIF - RRSP income or withdrawals
$\square \quad \mathrm{T} /$ /T3-Interest and dividends
$\square$
T4E - Employment insurance benefits
$\square \quad$ T5007-Worker's Compensation Benefits
$\square$ T5007-Social assistance payment
$\square$ T5008-Sale of stocks/bonds
$\square$ Rental income/expenses
$\square$ Business, farm, professional income/expenses
$\square$ Miscellaneous T slips and other information
$\square$ Sale documents - Real estate

## FARM RELATED

$\square \quad$ AGR -1 slips - Federal and Provincial
$\square$ Inventory Worksheet

## DEDUCTIONS

$\square \quad$ RRSP contributions receipts
$\square \quad$ Union dues or professional receipts
$\square$ Carrying charges and interest expenses
$\square$ Child care receipts
$\square$ Moving expenses
$\square \quad$ T2202A tuition and education receipts
$\square$ Interest paid on student loans
$\square$ Medical expense receipts (see enclosed worksheet)
$\square$ Charitable donation receipts
$\square$ Political contribution receipts
$\square$ Property tax or rent receipts
$\square$ Miscellaneous other deductions

## OTHER

$\square$ Last Income Tax Notice of (Re) Assessment
$\square$ Disability credit (if new, form T2201 required)
MB Primary Caregiver tax Credit Application Form

