



NEW CLIENT INFORMATION SHEET

Personal Income Tax

S.I.N.: _____

First Name: _____

Last Name: _____ Date of Birth: _____

Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Mobile: _____

E-Mail: _____

Marital Status: (Circle one) Single Married Common-Law Separated Divorced Widowed

Did your marital status change this year? If yes, when? _____

Please indicate the last year you filed an income tax return: _____

Children

- If you are divorced or separated, please note that only one parent can claim eligible dependant for each child.

First Name: _____

Last Name: _____ Date of Birth: _____

First Name: _____

Last Name: _____ Date of Birth: _____

First Name: _____

Last Name: _____ Date of Birth: _____

OTHER COMMENTS/QUESTIONS: _____

