

# PERSONAL TAX ORGANIZER

Date Of Completion \_\_\_\_\_  
YYYY DD MM

	D.O.B.	S.I.N.	Address	Phone No.
Name				
Spouse				
Dependent 1				
Dependent 2				
Dependent 3				
Dependent 4				

Marital Status:  Married     Common-Law     Separated     Divorced  
 Widowed     Single

Any Changes In Year:  Yes     No      Date Of Change: \_\_\_\_\_

Slips	Client	Spouse	Dependent 1	Dependent 2	Dependent 3	Dependent 4
T4						
T4A						
T4AOAS						
T4AP						
T4E						
T4RIF						
RRSP						

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Slips	Client	Spouse	Dependent 1	Dependent 2	Dependent 3	Dependent 4
T3						
T5						
T5007						
Split Pension						
Self Employment						
GST						
Rental Property						
Farm						
Employment Expense (T2200)						
Tuition (T2202)						
Disability Tax Credit (T2201)						
Investments						
Child Care Expenses						
Child/Spousal Support						
Charitable Contributions						
Medical Expenses						

