



HARBR

ACCOUNTING SERVICES

o/b 1000391437 Ontario Ltd.

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Peterborough, Ontario K9J 6W3

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2023

PLEASE DO NOT DROP OFF YOUR TAX INFORMATION UNTIL YOU HAVE ALL THAT YOU NEED!!

DATE IN: _____

NAME : _____ **NAME:** _____

S.I.N : _____ S.I.N : _____

D.O.B : _____ D.O.B : _____

PHONE : _____ PHONE : _____

EMAIL : _____ EMAIL : _____

DISABILITY? Y / N

DISABILITY? Y / N

ADDRESS: _____

MARITAL STATUS? - SINGLE COMMON-LAW MARRIED SEPARATED DIVORCED WIDOW

CHANGE ? YES / NO

CHANGE DATE - _____

SPOUSAL SUPPORT - _____ CHILD SUPPORT - _____

INCLUDE COPY OF SEPERATION OR DIVORCE AGREEMENT

DEPENDANTS – DID YOU HAVE A NEW CHILD IN THE YEAR?

NAME	S.I.N #	DISABILITY	GENDER
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1. _____	D.O.B _____	:	YES / NO -	M / F
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2. _____	D.O.B _____	:	YES / NO -	M / F
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3. _____	D.O.B _____	:	YES / NO -	M / F
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CHILD CARE EXPENSES – RECEIPTS (IF PERSONAL CHILD CARE PROVIDER NEED S.I.N OF INDIVIDUAL)

SPORTS/ART CAMPS (WEEK IN LENGTH) - RECEIPTS

ADULT RELATIVE - NEED NET INCOME IF NOT FILING THEIR RETURNS BUT CLAIMING TRANSFERS

PLEASE FILL OUT ALL INFORMATION;

DID YOU MOVE? YES / NO

DID YOU BUY A HOUSE? YES / NO

ARE YOU A FIRST TIME HOME BUYER? YES / NO - INCLUDE PURCHASE AGREEMENT

DID YOU SELL A HOUSE? YES / NO

