

Your 2007 Income

Check if you have any of the following income items:

Item	Slips to Bring
<input type="checkbox"/> Employment income	T4
<input type="checkbox"/> Taxable disability income	T4A
<input type="checkbox"/> Profit sharing income	T4PS
<input type="checkbox"/> Commission income	T4 or T4A
<input type="checkbox"/> Old Age Security income	T4A
<input type="checkbox"/> Canada Pension Plan income	T4AP
<input type="checkbox"/> Other pension/annuity income	T4A
<input type="checkbox"/> RRSP income	T4RSP
<input type="checkbox"/> RRIF income	T4RIF
<input type="checkbox"/> Withdrawals from RRSP	T4RSP
<input type="checkbox"/> EI Benefits	T4E
<input type="checkbox"/> Worker's Compensation (WSIB)	T5007
<input type="checkbox"/> Social assistance payments	T5007
<input type="checkbox"/> Dividend income	T3s and T5s
<input type="checkbox"/> Interest income	T5s
<input type="checkbox"/> Limited partnership income	T5013
<input type="checkbox"/> Rental property income	See next page
<input type="checkbox"/> Sale of real estate	See next page
<input type="checkbox"/> Sale of non-RRSP stocks	See next page
<input type="checkbox"/> Sale of non-RRSP mutual funds	See next page
<input type="checkbox"/> Self-employed income	See back page
<input type="checkbox"/> Alimony income	\$ _____
<input type="checkbox"/> Other income:	
_____	\$ _____
_____	\$ _____
_____	\$ _____

If extra slips are received after filing, there may be a service charge to adjust the return.

Your 2007 Deductions/Credits

Check if you have any of the following: Please include receipts.*



Item	Amount
<input type="checkbox"/> Charitable donations	\$ _____
<input type="checkbox"/> Political party contributions	\$ _____
<input type="checkbox"/> Labour-sponsored fund contributions	\$ _____
<input type="checkbox"/> RRSP contributions	\$ _____
<input type="checkbox"/> Moving expenses (in some circumstances)	\$ _____
<input type="checkbox"/> Tuition fees for yourself	\$ _____
<input type="checkbox"/> Children's / spouse's tuition fees (post secondary tuition only)	\$ _____

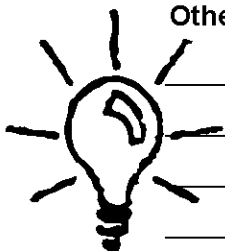
Please note amount and ensure that you have the receipts to support the following items: (If unsure, attach receipts)

<input type="checkbox"/> Employment expenses	see back page
<input type="checkbox"/> Alimony payments made	\$ _____
<input type="checkbox"/> Disability amount	\$ _____
<input type="checkbox"/> Medical expenses (out of pocket amounts)** <small>(includes any medical insurance paid by you)</small>	\$ _____
<input type="checkbox"/> Rent paid	\$ _____
<input type="checkbox"/> Property taxes paid	\$ _____
<input type="checkbox"/> Safety deposit box charges	\$ _____
<input type="checkbox"/> Legal fees for investment loan	\$ _____
<input type="checkbox"/> Investment loan interest	\$ _____
_____	\$ _____
<small>(Bank/Trust Company)</small>	
<input type="checkbox"/> Quarterly tax instalments paid to the government (these are not found on any T-slips)	\$ _____
<input type="checkbox"/> Union dues, professional fees	\$ _____
<input type="checkbox"/> Child care expenses	\$ _____
<input type="checkbox"/> Other _____	\$ _____

* If there is a discrepancy between the figures above and the receipts provided, we will use the total of the receipts provided.

** Do not include any medical amounts paid by insurance companies or paid by the Ontario Government etc, only amounts paid by you (and not reimbursed by anyone).

Other information you would like to tell us about.



If you are not sure we'll need it, bring it along!

Rental Property Income & Expenses



Address _____

Joint owner _____

Jt. Ownership % _____

Income (rent collected) \$ _____

Expenses

Advertising \$ _____

Insurance \$ _____

Mortgage Interest \$ _____

Repairs \$ _____

Property Taxes \$ _____

Salaries \$ _____

Utilities \$ _____

Condo Fees \$ _____

Other Expenses \$ _____

_____ \$ _____

_____ \$ _____

Major renovations & purchases (ie. Appliances) _____

_____ \$ _____

_____ \$ _____

If the property was purchased in the year, please provide the details.

Sale of Real Estate (excluding personal residence)



Address _____

Date Sold _____

Joint owner _____

Jt. Ownership % _____

Date Purchased _____

Purchase price \$ _____

Legal costs on purchase \$ _____

Additions / major improvements: _____

_____ \$ _____

_____ \$ _____

Sale Price \$ _____

Legal costs on sale \$ _____

Commissions paid on sale \$ _____

Other selling expenses \$ _____

Sale of Non-RRSP Stock (please provide broker's receipts for both the purchase and the sale)

Name of Stock	Date Sold (dd/mm/yy)	Number of Shares	Sale* Price	Purchase* Price	Commissions Paid

* Price per share

Sale or Transfer of Non-RRSP Mutual Funds (including systematic withdrawal programs)

Please provide the December 31, 2007 year end statements for all of your non-RRSP mutual funds.

These statements were sent to you by the mutual fund companies in January 2008. The statements show all transactions for 2007, including any sale, redemption or transfer of your shares in the mutual fund during the year.

List all of your mutual funds that had shares sold or transferred during 2007.



Self-Employed Income & Expenses

Name of Business _____

Type of Business and address if different from home _____

Joint Owner and % _____

Income \$ _____

Expenses

Advertising \$ _____

Licenses, dues, fees \$ _____

Insurance \$ _____

Interest/bank charges \$ _____

Meals/entertainment \$ _____

Office supplies \$ _____

Legal & accounting \$ _____

Rent \$ _____

Salaries \$ _____

Telephone \$ _____

Other expenses \$ _____

_____ \$ _____

_____ \$ _____

Equipment/furniture purchases (if you need more space, attach list)

_____ \$ _____

Registered for GST? YES NO

If yes, do the above figures include GST?

Automobile _____ SEE ACROSS

Home office _____ SEE BELOW



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Employment Expenses

Please ensure that you have a **signed T2200 (Declaration of Employment Conditions)** available should you be asked by the government to substantiate this claim. Please provide us with a copy of this form.

Expenses

Accounting, legal fees \$ _____

Advertising, promotion \$ _____

Meals/entertainment \$ _____

Lodging \$ _____

Parking \$ _____

Office supplies \$ _____

Telephone \$ _____

Is your employer registered for GST? YES NO

Other expenses: \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Automobile _____ SEE BELOW

Home office _____ SEE BELOW



Automobile Expenses

Please ensure that you keep a log of kms driven in the year
Year/Make of Car: _____

Purchase Price *** \$ _____

Year Purchased ** _____

Total Kilometres driven in 2007 _____

Business or Employment Use % _____

Expenses Total for 2007

Fuel \$ _____

Repairs \$ _____

Insurance \$ _____

Licensing \$ _____

Loan interest \$ _____

Lease payments (per month & annual amount) \$ _____

CAA membership \$ _____

Any per km flat allowance received \$ _____

Other expenses \$ _____

_____ \$ _____

** If a vehicle was disposed of in the year, please provide details

*** If leased vehicle, please provide a copy of purchase/lease paperwork

Home Office Expense

Business or Employment Use % _____

(percentage of house used for business or employment)

Expenses

Total for 2007

Heat \$ _____

Hydro \$ _____

Water \$ _____

Insurance (self-employed or commissioned only) \$ _____

Maintenance, repairs \$ _____

Mortgage Interest (self-employed only) \$ _____

Prop. taxes / Rent (self-employed or commissioned) \$ _____

Other \$ _____

