

LLS Financial Services Inc.Are You A Previous Client? Y/N If so which year _____ Are You A New Client? **How did you find out about us?** AD SIGN/TV Y/PAGES Google/Internet/FB REFERAL _____
Name**MARITAL STATUS** Married Divorced Single Widowed Separated Common LawChange of Marital Status during the year? YES NO If yes date YYYY -MMM-DD**CLIENT**

Mr / Mrs / Ms _____

Social Ins. # _____ Birth Date YYYY -MMM-DD**ADDRESS**

Street _____

City _____ Prov _____ Postal Code _____

Phone # _____ Cell # _____

Email Address _____

SPOUSE:

Mr / Mrs / Ms _____

Social Ins. # _____ Birth Date YYYY -MMM-DDIs your Spouses' Address the same as above? YES NO**DEPENDENTS**

Name _____ Birth Date _____

Name _____ Birth Date _____

Are you a Canadian Citizen? YES NODo you authorize CRA to provide your name/address to Elections Canada? YES NODo you own any foreign property in excess of \$100,000 Canadian? YES NOHow do you want to receive your notices of assessment? (If online please provide Your email address above) Mail On Line**DO YOU HAVE ANY OF THE FOLLOWING**Self-employment income? YES NORental income? YES NOChild care expenses? YES NOMedical expenses? (Prescriptions, Dental, Eyeglass's etc.) YES NODisability tax credit YES NODonations? YES NORent? YES NOProperty Tax? YES NO**RRSP INFORMATION**Have you contributed into an RRSP this past year? YES NO

If yes what is your Contribution room from your most recent Notice of Assessment? \$ _____

For Office Use: Tax Preparer _____

Update: _____