

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 - DDCLIENT Mr / Mrs / Ms _____Social Ins. # _____ Birth Date YYYY - MMM - DDADDRESS 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 NODEPENDENTS

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 LineDO YOU HAVE ANY OF THE FOLLOWINGSelf-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 NORRSP INFORMATIONHave 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: _____