



OLAFSON & JONES

Personal Income Tax Control Sheet

CURRENT CLIENT

ELECTRONIC DELIVERY?

YES

NO

DATE SUBMITTED: _____

How many returns are we preparing? _____ Year(s)? _____

Client Name: _____

Has your primary residence changed in 2020? Yes No

If yes, please provide your date of move: _____

Prior address: _____

New address: _____

If you owned previously: Sale price \$ _____ and Year of Purchase: _____

Has your marital status changed in 2020? Yes No

If yes, please indicate the date and type of change: _____

Have you had any children in 2020 or 2021? Yes No

If yes, please provide the date of birth: _____

Full name: _____

Did you **repay** CERB (Canada Emergency Response Benefit)? Yes No

If yes, did you repay any amounts? If so how much: \$ _____

Did you work from home 50% of the time over a period of at least four consecutive weeks? Yes No

If yes, has your employer provided form T2200 Declaration of Conditions of Employment? Yes No

If no, how many days did you work from home? _____

At any time in 2020, did you hold foreign property with a value of over C\$100,000.00? Yes No

If you are married of common law and we are **NOT preparing** your spouse's return, please fill out the information on the next page

CONTACT INFORMATION:

Primary phone number: _____ Type: _____

Secondary phone number: _____ Type: _____

Email: _____



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