

CONDENSED PERSONAL TAX CHECKLIST

Name of Primary Contact: _____

Name of Spouse (if applicable) _____

Have any of the following changed for either yourself or your spouse in 2024 (if yes, provide details)?

Phone Number: No Yes _____

Email Address: No Yes _____

Mailing Address: No Yes _____

Province of Residence: No Yes _____

Marital status: No Yes _____

Your name: No Yes _____

Your dependent(s): No Yes _____

Banking information: No Yes (provide void cheque or direct deposit form from your bank)

Did you sell any property in 2024? No Yes

Would you like to claim trips taken in 2024 from the northern travel deduction? No Yes, please complete chart below

	Dates of Trip		Destination	Cost of accomodation only	Names of family members in your household who travelled
	Start	End			
Trip 1	_____	_____	_____	\$ _____	_____
Trip 2	_____	_____	_____	\$ _____	_____
Trip 3	_____	_____	_____	\$ _____	_____
Trip 4	_____	_____	_____	\$ _____	_____
Trip 5	_____	_____	_____	\$ _____	_____
Trip 6	_____	_____	_____	\$ _____	_____
Trip 7	_____	_____	_____	\$ _____	_____
Trip 8	_____	_____	_____	\$ _____	_____