



WILLSEY DAVIS & Co. LLP
Chartered Accountants

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| PERSONAL INFORMATION | | | | | |
|--------------------------------------------------------------|----|-------------------------|---------------|---|---|
| | | Social Insurance Number | Date of Birth | | |
| | | | D | M | Y |
| Name | | | | | |
| Name of Spouse/Partner | | | | | |
| Name of Dependants | 1. | | | | |
| | 2. | | | | |
| | 3. | | | | |
| | 4. | | | | |
| Address | | Apt. # | | | |
| Street | | City | | | |
| Province | | Postal Code | | | |
| Telephone: Home () | | Telephone: Office () | | | |
| Telephone: Cell () | | Fax: () | | | |
| Is Your Address New This Year? | | | Q Yes Q No | | |
| | | | D | M | Y |
| Date of Departure from or Entry to Canada if Within Tax Year | | | | | |
| Date of Marriage if Within Tax Year | | | | | |
| Date of Separation or Divorce if Within Tax Year | | | | | |
| Date of Death | | | | | |
| Date of Dependant's Birth if Within Tax Year | | | | | |
| Province of Residency on December 31 | | | | | |

INCOME (include T3s, T4s, T4As, T5s, T600s, and invoices)

BUSINESS

Type of Business

| | | |
|---------------------|------------|----------------|
| Financial Statement | Q Included | Q Not Included |
|---------------------|------------|----------------|

Employer's Remittance Number | | | | | | | | | | | | | | | |

Wages or Partnership Allocation to Spouse \$

CAPITAL GAINS

| | | | |
|-------------|---|---|---|
| REAL ESTATE | D | M | Y |
|-------------|---|---|---|

| | | | | |
|-----------------------|------------------|--|--|--|
| Amount of Purchase \$ | Date of Purchase | | | |
|-----------------------|------------------|--|--|--|

| | | | | |
|-------------------|--------------|--|--|--|
| Amount of Sale \$ | Date of Sale | | | |
|-------------------|--------------|--|--|--|

LISTED PERSONAL PROPERTY

| | | | | |
|-----------------------|------------------|--|--|--|
| Amount of Purchase \$ | Date of Purchase | | | |
|-----------------------|------------------|--|--|--|

Commissions Paid and Legal Fees \$

| | | | | |
|-------------------|--------------|--|--|--|
| Amount of Sale \$ | Date of Sale | | | |
|-------------------|--------------|--|--|--|

Other Costs of Sale \$

| | |
|--------------------------------------------------------------------------|------------|
| DO YOU HAVE DEBT OR SHARES IN A CANADIAN CONTROLLED PRIVATE CORPORATION? | Q Yes Q No |
|--------------------------------------------------------------------------|------------|

IF YES:

| | | | | |
|-------------------------------|--------------------------|--|--|--|
| Amount of Loan or Purchase \$ | Date of Loan or Purchase | | | |
|-------------------------------|--------------------------|--|--|--|

| | | | | |
|-------------------|--------------|--|--|--|
| Amount of Sale \$ | Date of Sale | | | |
|-------------------|--------------|--|--|--|

Other Costs of Sale \$

| | |
|-------------------------------------------------------|------------|
| DID YOU TRANSFER A FARM TO CHILDREN OR GRANDCHILDREN? | Q Yes Q No |
|-------------------------------------------------------|------------|

| | |
|----------------------------------------------------------|------------|
| DID YOU TRANSFER SHARES OF A SMALL BUSINESS CORPORATION? | Q Yes Q No |
|----------------------------------------------------------|------------|

| | |
|-------------------------------------------------------------|------------|
| DID YOU TRANSFER FISHING PROPERTY TO A CHILD OR GRANDCHILD? | Q Yes Q No |
|-------------------------------------------------------------|------------|

IF YES TO A TRANSFER:

| | | | | |
|----------------------|------------------|--|--|--|
| Value of Transfer \$ | Date of Transfer | | | |
|----------------------|------------------|--|--|--|

| | |
|-----------------------------------------------------------------|------------|
| DID YOU BUY OR SELL SHARES OR MUTUAL FUNDS DURING THE TAX YEAR? | Q Yes Q No |
|-----------------------------------------------------------------|------------|

| | | | | |
|-----------------------|------------------|--|--|--|
| Amount of Purchase \$ | Date of Purchase | | | |
|-----------------------|------------------|--|--|--|

| | | | | |
|-------------------|--------------|--|--|--|
| Amount of Sale \$ | Date of Sale | | | |
|-------------------|--------------|--|--|--|

Other Costs of Sale \$

INCOME (include T3s, T4s, T4As, T5s, T600s, and invoices) (cont'd)

FEBRUARY 24, 1994 CAPITAL GAINS ELECTION AMOUNTS \$

CHILD SUPPORT

Received \$

Paid \$

COMMISSIONS \$

ELIGIBLE DIVIDENDS \$

Notice of designation by corporation:

Q Included Q Not Included

OTHER DIVIDENDS \$

EMPLOYMENT \$

TAXABLE BENEFITS \$

Automobile

Documents Attached

Q Yes Q No

Residence

Documents Attached

Q Yes Q No

Other

Documents Attached

Q Yes Q No

LOW INTEREST OR NO INTEREST LOANS

D

M

Y

Amount Outstanding \$

Date Outstanding

Amount Outstanding \$

Date Outstanding

GRATUITIES AND TIPS \$

INTEREST FROM INVESTMENTS \$

Canada Savings Bonds \$

Other Bonds \$

Mortgages \$

Trusts \$

FOREIGN ASSETS IN EXCESS OF \$100,000 \$

PENSIONS

RETIRING ALLOWANCES

Amount \$

RRSP Contributions \$

RRSP CONTRIBUTIONS

Amount \$

INCOME (include T3s, T4s, T4As, T5s, T600s, and invoices) (cont'd)

| | |
|----------------------------------------------------|----------------------------------------------------------|
| Home Buyers' Plan Withdrawals | |
| Lifelong Learning Plan Withdrawals | |
| RESP CONTRIBUTIONS | |
| Amount \$ | |
| CESG | |
| Amount \$ | |
| RESP Withdrawals | |
| RDSP CONTRIBUTIONS | |
| Amount \$ | |
| CDSG and CDSB | |
| Amount \$ | |
| RDSP Withdrawals | |
| TFSA CONTRIBUTIONS | |
| Amount \$ | |
| TFSA Withdrawals | |
| DIVIDEND INCOME \$ | |
| RENTAL PROPERTY | |
| Address | |
| Apt. # | City |
| Province | Postal Code |
| TAX SHELTERS | |
| Number | TS |
| Supporting Documents Attached | Q Yes Q No |
| U.S. INCOME | |
| Number of Days in the U.S. in the Past Three Years | |
| Type of Income Received | Q Employment Q Business Q Interest Q Inheritance Q Other |
| Supporting Documents Attached | Q Yes Q No |

EXPENSES (include receipts)

Child Care Expenses \$

Child Support Payments \$

Charitable Donations \$

Home Renovations \$

Medical Expenses \$

Moving Expenses \$

Professional Dues \$

Safety Deposit Box \$

Salesperson's Expenses (Form T2200) \$

Tuition Payments \$

Union Dues \$

ALLOWABLE BUSINESS INVESTMENT LOSS (ABIL)

DID YOU SELL SHARES TO A NON-RELATED PERSON AT A LOSS? Q Yes Q No

IS AN OUTSTANDING LOAN TO YOU BY A CORPORATION UNCOLLECTIBLE? Q Yes Q No

IF YES, TO EITHER QUESTION, DOCUMENT THE DETAILS FOR YOUR ALLOWABLE BUSINESS INVESTMENT LOSS

| | | | |
|------------------------------------|----------|----------|----------|
| FOR THE SMALL BUSINESS CORPORATION | D | M | Y |
|------------------------------------|----------|----------|----------|

Name

| | | | |
|--------------------------------------------|--|--|--|
| Date of Bankruptcy, Insolvency, or Wind-up | | | |
|--------------------------------------------|--|--|--|

FOR THE SHARES

| | |
|-----------------|------------------|
| Class of Shares | Number of Shares |
|-----------------|------------------|

| | | | |
|------------------|--|--|--|
| Date of Purchase | | | |
|------------------|--|--|--|

Adjusted Cost Base \$

FOR THE DEBT

Type of Debt

| | | | |
|---------------------|--|--|--|
| Date of Acquisition | | | |
|---------------------|--|--|--|

Adjusted Cost Base \$

Proceeds of Disposition \$

Amount of Your Loss \$

TRANSFERS TO SPOUSE ON SEPARATION

| | | | |
|--|----------|----------|----------|
| | D | M | Y |
|--|----------|----------|----------|

Your Spouse's Name

Property That You Transferred

| | | | |
|---------------|--|--|--|
| Transfer Date | | | |
|---------------|--|--|--|

| | | | |
|---------------------------|--|--|--|
| Separation Agreement Date | | | |
|---------------------------|--|--|--|

| | |
|--------------------------|------------|
| Consent to File Election | Q Yes Q No |
|--------------------------|------------|

| CHECKLIST FOR THE SELF-EMPLOYED | 3 |
|------------------------------------------------------------|----------|
| Advertising | |
| Allowable Reserves | |
| Convention Expenses | |
| Disability Modifications | |
| Insurance | |
| Interest | |
| Interest and Borrowing Charges | |
| Health Plan Premiums | |
| Home Office, if Place of Business | |
| Square Footage or Proportion of Rooms Dedicated | |
| Rent or Mortgage Interest | |
| Property Tax | |
| Home Insurance | |
| Annual Utilities | |
| <ul style="list-style-type: none"> • Heat | |
| <ul style="list-style-type: none"> • Hydro | |
| <ul style="list-style-type: none"> • Water | |
| <ul style="list-style-type: none"> • Sewage | |
| Maintenance and Repairs | |
| Leasing Costs | |

CHECKLIST FOR THE SELF-EMPLOYED (CONT'D)**3**

Meal Expenses

Automobile

- Own or Lease?

- If Lease, Lease Costs Per Month

- If Own, Interest Costs Per Month

- Odometer at Beginning of Tax Year

- Odometer at End of Tax Year

- Percentage of Business Use of Car

- Fuel Expenses

- Car Insurance

- Repairs and Maintenance

- Parking Expenses

Equipment Purchases Subject to CCA

Office Expenses

- Telephone & Fax

- Internet

- Stationery Supplies

- New Capital Assets (attach list)

- If Applicable, Tools

Professional Membership Fees

Fees for Professional Services

Salaries Paid

Travel