

Name

Social Insurance Number

Please indicate with an "X" in the boxes below regarding the following:

- |                          |     |                          |    |                                                                                                                                                                                                                                     |
|--------------------------|-----|--------------------------|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | I would like my return to be E-filed. (no extra charge)                                                                                                                                                                             |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | I would like the "Notice of Assessment" to be mailed directly to your office (\$10.00 extra charge)                                                                                                                                 |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Are you a Canadian Citizen?                                                                                                                                                                                                         |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Are you a citizen of Nisga'a Nation?                                                                                                                                                                                                |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | I would like to provide information to Elections Canada.                                                                                                                                                                            |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | I would like to provide my email address to CRA:                                                                                                                                                                                    |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | Did you dispose of a property in 2018 for which you are claiming a principal residence exemption?                                                                                                                                   |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | T1135: I owned foreign property valued over \$100,000 Canadian.                                                                                                                                                                     |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | T1144: I have received funds or property, or been indebted to, a non-resident trust in which I had an absolute or Conditional right as beneficiary.                                                                                 |
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No | T1141: I or my controlled foreign affiliate has made a transfer to or made a loan to, a non-resident trust in which I had an absolute or conditional right as a beneficiary, either directly or indirectly as defined in the rules. |

If Forms T1135, T1141, or T1144 are required to be filed, I understand that the completion of these forms constitutes a separate engagement and a separate fee will be charged for the completion of these forms. I also understand that there are substantial penalties for failing to complete and file Forms T1135, T1141, and T1144 by the due date.

I agree that fees will be charged in accordance with time spent and level of skill required. I also understand that the return will be prepared from information provided. The services set out in the foregoing letter are in accordance with my requirements. The terms set out are acceptable to me and are hereby agreed to.



Signature

Date

EMAIL ADDRESS ( For office use only if you do not wish to provide to Canada Revenue)