



Smither Community Services Association

Client Service Record

Tax Clinic

Please fill out the following to the best of your abilities.

Full name(s):

Contact Phone Number:

Contact Email:

Please list all tax years you would like to complete:

What is your marital status?

Are you a low to moderate income individual or family?

Are you filing your taxes for the first time in Canada?

Do you have any self-employment income, contract income, rental property income or capital gain?