

# Business Clients

The following information is required to process your taxes thoroughly and efficiently. If any items are missing from the report that is submitted, you may be assessed or audited by the government. Please be sure to complete the following items listed below before we begin the process.

Business Name:	Business Address:
Business Phone#:	Business Website:
Business Registration#:	Business Email:
Business Number (GST#):	Social Insurance Number:
Ontario Corp. Tax Account #:	Ontario Corporation #:
Incorporation Date:	Corporation Year End:
First and last page of the registration documents (Articles of Incorporation)	
Shareholders Names:	% of Shares
Shareholders Names:	% of Shares

Please sign to confirm that you have included all the items that will be used to process your taxes for this year. If you have any questions, please contact me before signing. Thank you for your cooperation and time.

\_\_\_\_\_  
DATE: MM/DD/YYYY

\_\_\_\_\_  
NAME: PRINT AND SIGN

Fill in all the necessary items that pertain to your business. If you need to include any items that are not listed, please add them. It is important that you keep all the receipts that refer to the numbers to be included on your tax return.

<b>Income</b> of Sales / Revenue	
GST/HST Collected	

## SPREADSHEET OF BUSINESS EXPENSES

<b>Expense Categories</b>	<b>Amount (\$)</b>
Advertising	
Office Expenses	
Office Supplies	
Insurance	
Subscription fees	
Legal fees	
Subscription fees	
Meals	
Entertainment	
Rent	
Property Taxes	
Mortgage Interest	
Wages/Salaries	
Travel (for business purposes)	

Utilities: Electricity	
Heating	
Water	
Internet	
Phone	
Motor Vehicle Expenses:	
Type of Car - Make & Model	
Gas / Mileage	
Insurance	
Maintenance & Repairs	
Licence & Registration Fee	
Other Car Expenses	
Leasing Papers	
Capital Cost Allowance	
Parking	

I have submitted these numbers to GTP Tax Services Inc to be used for my tax return. I am responsible for the numbers submitted and I have the documents to prove these numbers, if CRA requests them in any assessment requested.

\_\_\_\_\_  
DATE: MM/DD/YYYY

\_\_\_\_\_  
NAME: PRINT AND SIGN