

Curve Lake First Nation
Community Volunteer Income Tax Program

INCOME TAX CLINICS

SATURDAY MARCH 21ST

10:00 AM TO 3:00 PM

COUNCIL CHAMBERS

Government Services Building
Curve Lake, Ontario K0L-1R0

SATURDAY APRIL 11TH

10:00 AM TO 3:00 PM

COUNCIL CHAMBERS

Government Services Building
Curve Lake, Ontario K0L-1R0

Sponsored by the Gaming Revenue Fund



INCOME TAX INFORMATION

The CVITP (Community Volunteer Income Tax Program) is going to be running again this year for our members.

In the past, Chief and Council had the Finance Department do income tax returns for their members. You were able to drop your information off to Edith Knott or Mindy Knott. **This has now been changed.** The Finance Department will no longer be involved, so please do not call there.

This program is available through **volunteers** and the help of the **Gaming Revenue Fund**. We enjoy helping our seniors, families and students in filing their returns, **OR** they can actually do it themselves at one of our clinics.

Dates to be determined and posted.

In order to keep this important initiative going we are asking community members if they would be interested in joining our team! Please contact us!

Soon there will be a locked box at the front entrance of the Government Services building for you to drop off your information. Please put your information together in a **sealed plastic bag (ziploc)**. **Make sure it is sealed and won't fall out.**

The next 2 pages are for you to fill out. We require this information to do your return for you! Please fill it out and make sure that you sign the CVITP Taxpayer Authorization form where the **X** is.

1st **X**. Is allowing us to do your return from information you gave us.

2nd **X**. Is allowing us to efile your return.

Everything will be returned to you!

If you have any questions you may call:

Edith Knott 705-657-3486

Mindy Knott 705-768-8722

Laura Coppaway 705-657-3225

Name: _____

Contact Telephone Number: _____ if we have questions!

Address: _____

SIN # _____

DOB: Year/Month/Day _____

Income slips: (circle what you are sending) T4, T4A, T4E, T4A(P), T4A (OAS), T4RSP, T5, Education Slips T2202, T2202A, etc., Universal Child Care Benefit (RC62) slip

Marital Status: (circle one) Single Married Common-law Separated Widowed

If separated when:

Canadian Citizen: (circle one) YES NO

Do You Authorize Canada Revenue to give your name, address, date of birth, citizenship to Elections Canada? (circle one) YES NO

Who is to claim HST, and OTB credits? (circle one) ME SPOUSE

BELOW ONLY IF APPLICABLE TO YOU!

Info On Spouse or Common-law:

Name: _____

SIN# _____

DOB : Year/Month/Day _____

plus their net income OR income slips

ANY DEPENDANTS (make list of info for each child)

Name,

DOB,

SIN# (if applicable) any income? please send slips



Community Volunteer Income Tax Program Authorization

Tax year 2015

- Before you complete this form, read the information and instructions below.
- You have to complete this form to allow a Community Volunteer Income Tax Program (CVITP) volunteer to prepare your *Income Tax and Benefit Return*.
- The CVITP volunteer has to complete parts E and F.
- Give the signed original of this form to the CVITP volunteer, ~~and keep a copy for yourself.~~

Part A – Identification and address as shown on your income tax return

First name	Last name	Social insurance number
Mailing address: Apt. No. – Street No. Street name		
P.O. Box	R.R.	City
		Prov./Terr. Postal code

Part B – Taxpayer disclaimer

I am fully aware that my *Income Tax and Benefit Return* is prepared by a volunteer under the Community Volunteer Income Tax Program and that this volunteer is not an agent of the Canada Revenue Agency.

Signature (Individual identified in Part A) _____ Date _____ Curve Lake, Curve Lake F.N.
Signed at (place and name of organization)

Part C – Declaration

Enter the following amounts from your income tax return, if applicable:

Total income (line 150) _____

Taxable income (line 260) _____ Refund (line 484) _____

Total federal non-refundable tax credits (line 350 of Schedule 1) _____ or Balance owing (line 485) _____

Part D – Declaration and authorization

I declare that the information entered in Part A and the amounts shown in Part C above are correct and complete, and fully disclose my income from all sources. I also declare that I have read the information and instructions below, and I authorize the electronic filer identified in Part E to electronically file my income tax return.

Signature (Individual identified in Part A) _____ Date _____

To be completed by the CVITP volunteer

<p>Part E – Electronic filer identification</p> <p>By signing Part D above, the individual in Part A authorizes the following person or firm to electronically file his or her income tax return. Part D must be signed before the return is electronically transmitted.</p> <p>Name of person or firm: _____</p> <p>Electronic filer number: _____</p>	<p>Part F – Document control number or confirmation number</p> <p>Enter the document control or confirmation number for the individual's electronic record:</p>
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Information and Instructions

You must complete parts a and b to allow a CVITP volunteer to prepare your *Income Tax and Benefit Return*. If you want your return sent by EFILE, you must also complete Part C, and sign Part D. Once you sign Part D, you authorize the electronic filer to electronically file your return. In addition, you acknowledge that under the *Income Tax Act* you have to:

- keep all records used to prepare your return for a period of six years, and provide this information to us on request; and
- give the signed original of this form to the electronic filer named in Part E, and keep a copy for yourself.

You also acknowledge that the Canada Revenue Agency is responsible for ensuring the confidentiality of your electronically filed tax information **only** after we have accepted it.