Information Return for Electronic Filing of an Individual's Income Tax and Benefit Return

Agence du revenu du Canada

Canada Revenue

Agency

• Before you fill out this form, read the information and instructions on page 2 of this form.

• Part D must be signed by the individual identified in Part A or by the individual's legal representative	e. Your electronic filer must fill out Parts C (prior to your return
being submitted) and Part E (once your return has been submitted).	

• Give the signed original of this form to your electronic filer and keep a copy for yourself.

Part A – Identification and address as shown on your	return (n	nandator	V)			
First name	Last nam			Social insurance number		
Mailing address: Apt no – Street no Street name	PO Box	RR	City		Prov./Terr Postal code	
Maning address. Apt no – Street no Street name	FO BOX		City			
Get your CRA mail electronically delivered in My Account at canada.ca/my-account (optional)						
Email address:						
By providing an email address, I am registering to receive email r	otification	s from the	e CRA and I agree to	o the Terms of use on pag	e 2 of this form.	
Part B – Declaration of amounts from your General Income Tax and Benefit Return (mandatory)						
Enter the following amounts from your return, if applicable:						
Total income (line 150)				Refund (line 484)		
Taxable income (line 260)				or		
Total federal non-refundable tax credits (line 350 of Schedule 1).				Balance owing (line 485)	· · · · ·	
Part C – Electronic filer identification (mandatory)						
By signing Part D below, I declare that the following person or firm is electronically filing the T1 return or the amended T1 return of the person named in Part A.						
Part D must be signed before the return is electronically transmitted.						
Name of person or firm: Koroll & Company, CPAs, Profess	ional Co	rporation		Electronic filer number:	W8955	
Part D – Declaration and authorization (mandatory)		•				
I declare that the information entered in Part A , B and C is correct and complete and fully discloses my income from all sources. I also declare that I have read the information on page 2 of this form, and that the electronic filer identified in Part C is filing my return. I allow this electronic filer to communicate with the CRA to correct any errors or omissions.						
· · · · · · · · · · · · · · · · · · ·						
Signature (individual identified in Part A or legal representative)	Nam	e and title c	of legal representative	Yea	r Month Day	
Part E – Document Control number (mandatory)						
The document control number generated for my electronic record	:					
Part F – Delivery of your notices of assessment and re	eassessr	nent (a s	election must be	made)		
How do you want to receive your notices of assessment and reassessment? Select one of the following electronic options:						
I am registering (as indicated in Part A above) or I am alreat of assessment and reassessment online.	ady registe	ered to rec	eive email notificati	ons from the CRA and car	view and access my notices	
I would like my electronic filer to receive a one time notice of assessment and reassessment electronically in their software and provide me with a copy.						
Provide your electronic filer with authorization by filling out Form T1013, Authorizing or Cancelling a Representative.						
I understand that ticking the box above (\checkmark) I am allowing the CRA to electronically provide my assessment results and my notices of assessment and reassessment to the electronic filer (including a discounter) named in part C . I will now receive a copy of my notices of assessment and reassessment from						
my electronic filer. For more information, see page 2 of this form.						
OR						
I would like to receive paper notices of assessment and re-	assessme	nt through	n Canada Post.			
I will receive my notices of assessment and reassessment through Canada Post once my return or amended return has been assessed. If I have already registered to receive email notifications from the CRA and I tick this box, I understand that I will not receive a copy of my notice through Canada Post.						
Part G – Pre-authorized debit agreement (optional)						
Do you want to pre-authorize the CRA to withdraw a specified amount from your bank account? If so, fill in the information below: I hereby authorize the electronic filer to create this personal pre-authorized debit on my behalf. I authorize the CRA to automatically withdraw the funds from my bank account as per the agreement details listed below. I acknowledge that I have read and understood the information about pre-authorized debit on page 2 of this form.						
Signature		-	Year M	onth Day		
One time payment for your Individual income tax (T1), to be withdrawn on III III, for the amount of Year Month Day						

(Ce formulaire est disponible en français.)

Tax year: 2018

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