

Client Information Update

Description	Yours	Spouse
Name		
Address		
City		
Postal Code		
Email		
Home Phone		
Cell Phone		
Work Phone		

Please provide children and parents (living with you) details below.

Name	Relationship	Birth date	SIN	Any Infirmity	Net Income

If you have other Professional Advisors who we may need to contact for tax purposes, please provide their contact details below.

	Phone Number	Email
Lawyer (Wills & Estates)		
Stock Broker		
Life Insurance Representative		
Financial Planner		