



Tax year 20

### Community Volunteer Income Tax Program Taxpayer Authorization

Keep this form for your records. Do not send a copy to the Canada Revenue Agency (CRA).

- Complete **Section I** to allow a volunteer of the Community Volunteer Income Tax Program (CVITP) or Income Tax Assistance – Volunteer Program (ITAVP) to prepare your income tax and benefit return.
- Complete **Section II** if you would like your return to be electronically filed. The CVITP/ITAVP volunteer must complete parts **E** and **F**.
- Keep all records used to prepare your return for a period of six years, and provide this information to the CRA on request.
- The CRA is responsible for ensuring the confidentiality of your electronically filed tax information **only** after the CRA has accepted it.

#### Section I – Authorization

##### Part A – Identification

Last name		First name		Social insurance number (only enter last 3 digits)	
				x   x   x   x   x   x	
Mailing address: Apt. No. – Street No. Street name			Telephone number (home)	Telephone number (work)	
P.O. Box	R.R.	City		Prov./Terr.	Postal code

##### Part B – Disclaimer

I am fully aware that my income tax and benefit return is being prepared by a volunteer under the Community Volunteer Income Tax Program and that this volunteer is not acting as an agent of the Canada Revenue Agency.

\_\_\_\_\_  
Signature (individual identified in Part A)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signed at (place and name of organization)

#### Section II – Electronic filing (EFILE)

##### Part C – Declaration

Enter the following amounts from your income tax return:

Total income (line 15000) . . . . . \_\_\_\_\_

Taxable income (line 26000) . . . . . \_\_\_\_\_

Total federal non-refundable tax credits (line 35000) . . . . . \_\_\_\_\_

Refund (line 48400) \_\_\_\_\_

or  
Balance owing (line 48500) \_\_\_\_\_

##### 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 discloses my income from all sources. I also declare that I have read the information above, and the electronic filer identified in Part E is electronically filing my income tax and benefit return.

\_\_\_\_\_  
Signature (individual identified in Part A)

\_\_\_\_\_  
Date

**CVITP volunteer must complete parts E and F**

**Part E – Electronic filer identification**

By signing Part D above, the individual in Part A declares that the following person or organization is electronically filing his or her income tax return. Part D must be signed before the return is electronically transmitted.

Name of person or organization: \_\_\_\_\_

Electronic filer number: \_\_\_\_\_

**Part F – Document control number**

Document control number for the electronic record of the individual's return:

\_\_\_\_\_

**We're here to help!**

If you need more information on your tax refund or your tax return, or if you have a service complaint, go to [canada.ca/cra-contact](http://canada.ca/cra-contact) or call **1-800-959-8281**.

**Privacy Notice**

Personal information is collected under the authority of the Income Tax Act (ITA) and the Canada Revenue Agency Act. The information collected is used to confirm: your identity, the full and complete disclosure of your revenue from all sources, the identity of the volunteer that is electronically filing your return under the CVITP/ITAVP, and your consent to have your return filed electronically by this volunteer under the CVITP/ITAVP. If you do not provide this information and your signature, the volunteer will not be able to complete or file your return electronically.

Please refer to Personal Information Banks CRA PPU 005 and CRA PPU 100 at [canada.ca/cra-information-about-programs](http://canada.ca/cra-information-about-programs). Under the Privacy Act, individuals have a right to protection and correction of, and access to, their personal information. They also have the right to file a complaint with the Privacy Commissioner of Canada regarding our handling of their information.