Canada Revenue Agence du revenu Agency du Canada

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

**Protected B**

when completed

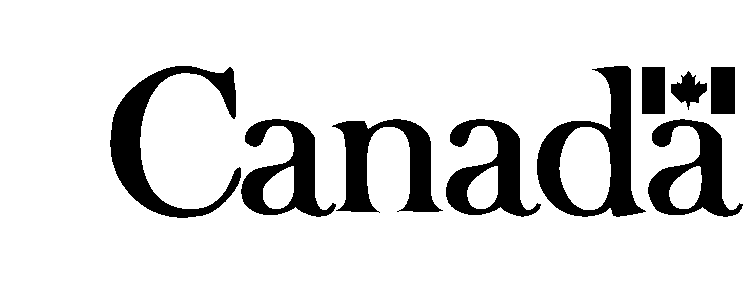
# Tax year: 2022

The information on this form relates to the tax year shown in the top right corner. Before you fill out this form, read the information and instructions on **page 2**. The individual identified in Part **A** (or the individual's legal representative) must sign Part **F**. Your electronic filer must fill out Part **C** and Part **D** before submitting your return. Give the signed original of this form to your electronic filer and keep a copy for yourself.

|  |  |
| --- | --- |
| 865 | 28 |
| 2,289 | 49 |

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| --- | --- | --- | --- | --- |
| **Part A - Identification and address as shown on your tax return** (mandatory) | | | | |
| First name  VANSH | | Last name  VANSH | Social insurance number  \*\*\* \*\*5 683 | |
| Mailing address: Apt number - Street number - Street name  12 BLUE EAGLE TRAIL | | | | |
| PO Box | RR | City  SCARBOROUGH | Prov./Terr  ON | Postal code  M1V 1V9 |
| **Get your CRA mail electronically delivered in My Account** (optional) | | | | |
| Email Address: | | | | |
| By giving an email address, I am registering to receive email notifications from the CRA and agreeing to the terms of use on **page 2**. | | | | |
| **Part B - Declaration of amounts from your Income Tax and Benefit Return** (mandatory) | | | | |
| Enter the following amounts from your return, if applicable:  Total income (line 15000) . . . . . . . . . . . . . . . . . . . . 865 28 Refund (line 48400) . . . . . . . . . 47 64  Taxable income (line 26000) . . . . . . . . . . . . . . . . . . or  Total federal non-refundable tax credits (line 35000). Balance owing (line 48500) . . . . | | | | |
| **Part C - Electronic filer identification** (mandatory) | | | | |
| By signing Part **F** below, I declare that the following person or firm is electronically filing the new or the amended Income Tax and Benefit Return of the person named in Part **A**. Part **F must be signed** before the return is electronically transmitted.  Name of person or firm: PRASHANT PATEL Electronic filer number: E6287  Representative identifier (Rep ID): | | | | |
| **Part D - Document Control number** (mandatory) | | | | |
| The document control number generated for my electronic record: E628722WGW6PK | | | | |
| **Part E - How do you want to receive your notices of assessment and reassessment?** (select one or more of the following electronic  options) | | | | |
| I am registering (as indicated in Part A above) or I am already registered to receive email notifications from the CRA and can view and access my notices of assessment and reassessment online.  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.  I understand that by ticking (X) this box, 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 the Express NOA section on **page 2**.  **OR**  X I would like to receive paper notices of assessment and reassessment through 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 F - Declaration and authorization** (mandatory) | | | | |
| I declare that the information entered in parts **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**, 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.  Text, letter  Description automatically generated    Signature (individual identified in Part **A** or legal representative) Name and title of legal representative    Year Month Day HH MM SS | | | | |

Privacy Act, personal information bank number CRA PPU 211

T183 E (22) Page 1 of 2