



Authorization for Parliamentarians

This form authorizes the Canada Revenue Agency to release confidential client information to a member of Parliament or a senator and their staff.

I hereby authorize the **Canada Revenue Agency** to disclose to _____
(Print name of parliamentarian)

information of any kind relating to me as identified below and raised in my correspondence/communication of _____
Year Month Day

Please check (✓) the appropriate area(s)

Income tax matters

GST/HST matters

CPP/EI matters

Other matters (please specify): _____

Client Identification		
Print surname, name, or name of business, corporation, trust, or unincorporated charity and specify type of entity		
Street address	Home telephone number	Work telephone number
City	Province	Postal code

Complete the one that applies:

Social insurance number (in the case of individuals only)

Business number: Import/Export

 Payroll deductions

 Corporate income tax

 GST/HST

Filer identification number

Trust account number

Non-Resident account number (or)

Non-Resident account number

Comments:

_____	_____
Print client name (if not indicated above)	Title (if applicable)
_____	_____
Client signature	Date