



Version 2026-10-06

Year childcare services were provided

Complete one form per payer and provider. Children from the same family may be grouped together. Complete the beige fields.

01 | CHILDREN AND CHILDCARE EXPENSES

Last name and first name	Date of birth A • YYYY-MM-DD	Days paid B.1	Weeks B.2	Total paid C • \$	Non-qualifying expenses D • \$	Qualifying expenses E • \$

B.1: days of childcare paid for. B.2: weeks at a boarding school or overnight camp. Use separate forms if both types of services apply to the same child.

C: fees for services provided in the year concerned and actually paid when the slip is filed. D: non-qualifying expenses included in C. E = C - D (automatic calculation).

Year childcare services were provided

Complete one form per payer and provider. Children from the same family may be grouped together. Complete the beige fields.

02 | PERSON WHO PAID THE CHILDCARE EXPENSES

Last name

First name

Payer's SIN — box G

Street address and apartment

City, province and postal code

03 | CHILDCARE PROVIDER

Provider's name

Identification number — box H

Type of number provided

Full address and postal code

Box H: facility number (CPE/daycare centre), school code, identification number (recognized home childcare provider) or, for other providers, Québec enterprise number (NEQ) or the individual's SIN.

04 | ADDITIONAL INFORMATION, IF NEEDED

If more than one person paid, allocate the expenses actually paid and complete one form per payer. Attach another form if there are more than four children.

Source: Revenu Québec, Guide to Filing the RL-24 Slip (RL-24.G, 2025-10). Information collection questionnaire; expenses validated by GestionJC.