

<b>TAX RETURN CHECKLIST</b>		Client Name	
<b>- Non Business -</b>		Financial Year	
<b><i>New Clients:</i></b>			
Contact details: Mobile		BH	
AH		Email	
Full Name for Tax Return			
Date of Birth		Medicare no.	
Tax File Number		<i>(Optional - for Medical Expenses download)</i>	
<input type="checkbox"/> Please provide a copy of your last <u>tax return</u> lodged if possible (showing what income and deductions you claimed last time)			
Spouse: Name		Tax file no. <i>(if we prepare return)</i>	
Date of birth		Income: <i>(if we do not prepare return)</i>	
Child 1: Name		Date of birth	
Child 2: Name		Date of birth	
<input type="checkbox"/> If you have more children, please list overleaf or add another page			
<b><i>All Clients:</i></b>			
Current Address:			
Main Occupation This Year:			
Bank a/c details for refund:			
<b><i>Tax Information Checklist (optional):</i></b>			
<input checked="" type="checkbox"/> This checklist is for your convenience. Please use as needed			
<b><i>Income:</i></b>			
<input type="checkbox"/> PAYG Payment Summaries <i>(Group Certificates)</i>	<input type="checkbox"/> Centrelink Statements		
<input type="checkbox"/> Employment Termination Statements	<input type="checkbox"/> Interest details		
<input type="checkbox"/> Superannuation Withdrawal Statements	<input type="checkbox"/> Rental Property income and expenses		
<input type="checkbox"/> Employee Share Schemes	<input type="checkbox"/> Foreign Income & Foreign Pensions		
<input type="checkbox"/> Dividend Statements <i>(or provide your SRN/HIN numbers for us to download statements)</i>			
<input type="checkbox"/> Other Investment Income Statements eg partnerships, trusts, managed funds			
<input type="checkbox"/> Capital Gains information - i.e. re: Sale of investments <i>(we will need sale and purchase details)</i>			
<input type="checkbox"/> Deceased Estate Information	<input type="checkbox"/> Other Income		
<b><i>Expenses:</i></b>			
<input type="checkbox"/> Work Related Expenses (WRE's): <i>(refer to our Checklist- Tax Deductible Expenses to see what's claimable and what's not)</i>			
<input type="checkbox"/> Car Expenses, Log Book, KM travelled	<input type="checkbox"/> Clothing & Laundry	<input type="checkbox"/> Other WRE's	
<input type="checkbox"/> Travel Expenses (other than own car)	<input type="checkbox"/> Self Education		
<input type="checkbox"/> Donations <i>(but not raffle tickets or merchandise purchases)</i>	<input type="checkbox"/> Income Protection Insurance		
<input type="checkbox"/> Investment Income Deductions	<input type="checkbox"/> Australian Film Industry Incentives		
<input type="checkbox"/> Personal Super Contributions - for self or spouse <i>(please provide your Super Fund letter acknowledging your intent to claim)</i>			
<input type="checkbox"/> Tax Agent Fees	<input type="checkbox"/> Other Deductions		
<input type="checkbox"/> Medical Expenses - finishes in 2014/15	<input type="checkbox"/> HELP Debt Fees for 1st Semester this year		
<i>(list out of pocket expenses, including pharmacy medical supplies)</i>	<input type="checkbox"/> Invalid Relative's or Carer's Income		