

Records Required
INCOME

Name:

	√	Comments
Salary and Wages – from whom <hr/> <hr/>	<input type="checkbox"/>	
National Super: Contract Withholding Income: ACC WINZ	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Other Income (Please attach advices & certificates)

Interest Dividends Unit Trusts Rents Received – Have you purchased a rental property in the current Financial year? Please advise us of details <hr/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Other Income Any overseas income (super, unit trust)	<input type="checkbox"/> <input type="checkbox"/>	

Family Assistance

	How													
<ul style="list-style-type: none"> Spouse Name. _____ Spouse IRD No _____ Do you want us to file a return for your spouse If you have received family support during this tax year or think you are entitled please complete details 	<input type="checkbox"/> <input type="checkbox"/>													
<table border="0"> <thead> <tr> <th>Name</th> <th>Date of Birth</th> <th>Date left school</th> </tr> </thead> <tbody> <tr> <td>.....</td> <td>...../...../.....</td> <td>...../...../.....</td> </tr> <tr> <td>.....</td> <td>...../...../.....</td> <td>...../...../.....</td> </tr> <tr> <td>.....</td> <td>...../...../.....</td> <td>...../...../.....</td> </tr> </tbody> </table>	Name	Date of Birth	Date left school/...../...../...../...../...../...../...../...../...../...../...../.....		
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<ul style="list-style-type: none"> Please supply any Winz/IRD certificates relating to family assistance received If your living arrangements have change during the year to 31 March please detail. 	<input type="checkbox"/> <input type="checkbox"/>													
<ul style="list-style-type: none"> Have you paid or received maintenance to/from any person during the year? If so how much? If we do not complete your partner's tax return please supply full details of their income. 	<input type="checkbox"/> <input type="checkbox"/>													
In work Payment <ul style="list-style-type: none"> How many weeks did you work more than 20 hours (solo parent) or 30 hours combined (joint)..... 	<input type="checkbox"/>													

Rebates

<ul style="list-style-type: none"> Donations (attach receipts) Housekeeper/ Crèche Rebate 	<input type="checkbox"/> <input type="checkbox"/>	
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Thank you for completing this questionnaire
Don't forget to sign on the front page