

**BOB LAZER TAXATION
P O BOX 450
Mt MARTHA Vic 3934
03 59 88 4622**

TAXATION INFORMATION REQUIRED

1. To which tax year do these details relate?
.....
2. Full name, Tax File Number, Address, Date of Birth, Occupation.
.....
3. PAYG Summary (Group Certificate) from employer/s, Super Fund, ETP, Super Lump Sum, Centrelink – please enclose
.....
4. Centrelink payments, if any, and type of payment
.....
5. Bank Interest received and bank charges, bank interest paid on investment loans.
.....
6. Dividends received – if no div notice, name of company and number of shares held – we have a book of every dividend paid.
.....
7. Annual Distribution Statement for Trusts and Managed Funds – not quarterly reports as these do not give the required tax treatment.
.....
8. List of donations
.....
9. Hospital insurance cover? Confirmation & member number.
.....
10. Total medical expenses after reimbursement – i.e. total out of pocket \$
.....
11. Sold any shares, investments, land or houses? : date purchased and \$ cost, date sold and \$ received, any unclaimed holding costs
.....
12. Do you use car for work, investment, or professional development travel? Number of kilometres, registration number, make of car, (If over 5000 km log book % and opening & closing odometer readings.)
.....
13. Do you do any work in home office? – how often? electricity & gas \$?
.....
14. Stationery & computer supplies purchased for work
.....
15. Mobile phone \$\$ and % for work or investment
.....
16. Home phone or internet used for work - \$\$ and %
.....
17. Text books and publications purchased for work or investment.
.....
18. Any seminars or in-service training costs and fares
.....
19. Any professional memberships or union fees
.....
20. Do you use any of your equipment for work – computer, office equipment
.....
21. Any new equipment or tools of trade purchased for work or home office
.....

22. Do you travel interstate or overseas for work – number of days away and out of pocket expenses
.....
23. Are you a single parent? Name of dependents, dates of birth, days of care
.....
24. BSB (6 digit) and account number and title for direct refund credit.
.....
25. Have you got an investment property – date purchased, weeks rented - rent \$ received and \$ expenses
.....
26. Expenses specific to occupation – tools, clothing, protective items, safety
.....
27. Any special clothing, uniform required? Who cleans, launders?
.....
28. Any Uni or TAFE courses – nature of course, nexus to occupation, fees, books, travel – name of uni and course.
.....
29. Are you married? spouses name, date of birth, separate net income
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30. Any children? How many? Names?
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31. Any income earned as a business not included on Group Certificates? ABN number, amount invoiced, expenses incurred.
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32. Have you paid any PAYG Instalments, quarterly or annually? Dates and \$\$ paid.
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33. If you qualify for Family Benefits, have you paid for any education expenses for children? Only texts, books, computer and internet - names and if primary or secondary students?

NO INVOICES OR RECEIPTS REQUIRED – JUST NOTATE \$\$ SPENT