## **MARTIN CHIEW & ASSOCIATES**

Tax Consultants and Institute of Public Accountants 3rd Floor, 258 Little Bourke Street Melbourne VIC 3000 TEL: (03) 9662 1448 FAX: (03) 9639 0775 / (03) 9662 4668 EMAIL: info@martinchiew.com.au

ABN 60 620 670 635

Name:	First: Surname:				
TFN: (tax file number)					
Date of Birth:					
Occupation:					
Sex:	Male:		Female:		
Home Address:					
Postal Address: (if different from postal)					
Mobile/Home Ph:					
Email Address:					
Bank Account Details for Refund Purpose	BSB: Account No: Account Name:				
Tax Resident - full year?	If not, indicate date became tax resident:				
Please provide spouse and depo	endent	child	ren information		
Spouse and Dependent Children Info	rmation				
Spouse Name:	First:		Surnai	me:	
Date of Birth:					
Spouse Taxable Income:					
Number of Dependent Children:					

## **INCOME**

PAYG Summaries from Employers
Centrelink Payment
Dividend & Franking Credit
Bank Interest

## **DEDUCTIONS & MEDICARE**

DEDUCTIONS & MEDICARE	
Have you used your personal car for work related purpose? If so how many kilometres have you travelled for the financial year? Any travel to and from home should not be included.	Please provide rego, car engine type and work related KM travelled
Have you used logbook to keep track of business usage of MV expenses, if so, written evidence for all car expenses except fuel should be provided.	Logbook details needed
Have you incurred any travel expenses such as airfare, taxicab, and accommodation for worked related purposes? If so, please provide details and amount paid	Where travel allowance was received, reasonable ATO amount can be claimed without receipts
Uniform, Protective clothing, laundry and dry cleaning expenses	ATO rate for laundry
Self-education expenses	Amount & receipts
Have you paid any short courses, seminars or conferences that are work related, if so how much?	Amount & receipts
Have you used mobile for work, if so, what is your monthly payment and the percentage usage for work	Amount
Have you had a home office and worked from home, if so, how many hours per week on average	Hours spent per week
Have you bought any computer/laptop/equipment/tools or stationery that were work-related? Provide the date bought and amount paid for each	Receipts
Did you pay for any subscriptions/memberships/registrations/association/union fees that were work related? Please provide the paid amount for each	Receipts
Have you used the internet at home for work related purposes, if so how much is the monthly payment and the percentage of business usage	Amount
Do you have the current low value pool, if so please provide details	Low value pool schedule
Have you made any donations, if so please provide details	Receipts
How much did you pay for your tax return last year and how many kilometres you have travelled to your tax agent	Receipt & KM travelled
Have you had the income protection insurance? if so how much is the premium	Copy of insurance
HELP debt as shown on the taxpayer's statement issued from ATO	Amount
Have you made any child support payment, if so please provide details	Amount
Details of any super contributions made for your spouse	Amount
Please provide private <b>HOSPITAL COVER</b> details such as insurance provider, membership number and number of days covered	Copy of <b>HOSPITAL</b> cover

I agree that MARTIN CHIEW & ASSOCIATES can access the Tax Office Tax Agent Portal and gather information	on necessary to complete my tax
return and handle my tax affairs.	

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Signed:	Date:	-	:	2