

# Tax Return Information Form

For Financial Year Ended \_\_\_\_\_



Please return this form back to our office **PRIOR** to your appointment:

TO: BRJ Accountants

ATTENTION: Barry / Maree (circle which is applicable)

E-MAIL: reception@brjeffrey.com.au

CLIENT NAME:		CLIENT SIGNATURE:	
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## INFORMATION FOR 2016 TAX RETURN (1 July 2015 to 30 June 2016)

Name:		Spouse Name:	
DOB:		Spouse DOB:	
Residential Address:		Postal Address:	
TFN:		Email:	
Phone:	W	H	M
Is the above information correct and current? <input type="checkbox"/> Yes <input type="checkbox"/> No – if not, please correct			

## CHILDREN

Name:		Name:	
DOB:		DOB:	
Name:		Name:	
DOB:		DOB:	

## PAYG PAYMENT SUMMARIES

Please attach all payment summaries.

## BANK INTEREST

Bank:	Amount:	TFN Credits:	Bank Charges:
	\$		
	\$		

## WORK & OTHER EXPENSES

Please attach summary all expenses and attach receipts to substantiate

## PRIVATE HEALTH INSURANCE

Fund Name:		Type of Cover:	
Membership No:		Days Covered:	Excess:
30% Rebate Claimed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Out-of-pocket Medical Expenses:	\$

## DO YOU HAVE ANY OF THESE ITEMS?

If yes, please advise as additional summary is required

- Investment Income  Rental Properties  
 Investments Sold  Motor Vehicles used for Work

\*Please have receipts available at time of consultation should they need to be referred to