

TO: D & D FINANCIAL CONSULTANTS LIMITED

DATE PREPARED: \_\_\_\_\_

Name of Client: \_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Balance Date: 31 March 2019

Terms of Engagement:

I accept responsibility for the accuracy and completeness of the information supplied on the annual questionnaire which is to be used in the preparation of my financial accounts and tax return for the year ended 31 March 2019.

I also accept responsibility for all other records and information supplied to you other than those listed on the questionnaire. I accept responsibility for any failure by me to supply all relevant records and information to you.

I give D & D Financial Consultants my full authority to obtain information from my Bank, Lawyer, Financial Advisor, WINZ, Inland Revenue and other parties for any purposes relating to my affairs. I acknowledge that this information would not otherwise be available due to Privacy Act restrictions, but I give my full authority for this statement to be used as a written confirmation of my agreement to you in obtaining information from the Bank, Lawyer, Financial Advisor, Inland Revenue and other parties for the purpose of preparation of the 2019 financial statements and taxation returns.

**Signature:** \_\_\_\_\_

**Name:** \_\_\_\_\_

2019 Personal Income Tax Questionnaire

(a) **Personal Income** Please Circle

Did you receive income from:

- **Wages or salary** (this information will be automatically sent to us by Inland Revenue Department after 31 March 2019) Yes/No

- **Interest** Yes/No  
Also include the withholding tax certificate that the Bank will issue to you detailing gross interest paid and tax withheld.

-**Dividends** - schedule the companies and imputation credits; Yes/No  
Include any bonus shares received.

-**National superannuation** and other **superannuation.** Yes/No

-**Rents received** (detail gross and expenses paid against rental income) Yes/No

-**Share of any Estate,** - capital & income. Yes/No

-**Share from partnership income.** Yes/No

-**Income tested benefits** Yes/No

-**Other income** -including overseas earnings, show any tax paid overseas; Yes/No  
profit on the sale of dealing in shares, land, buildings, etc;  
profits made from any home business.

-**Income from cash jobs, tips, etc.** Yes/No

(b) **Rebates**

-**Young family** (name and date of birth) Yes/No

-**Donation Receipts** over \$5 (NOT payment of school fees/books). Yes/No  
Donations qualify over \$5.

(c) **Student Loan**

-Do you have a student loan? Yes/No

-Have you made any voluntary repayments? Yes/No

(d) **Expenses**

-Premium paid on Loss of Earnings and Disability policies Yes/No  
Please attach invoice

(e) **Tax Refund**

In order to speed up the deposit of your tax refund please provide us with your bank details so we may include this in your tax return.

**Bank Account Name:** \_\_\_\_\_

**Bank Account Number:**

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**Thank you for completing this questionnaire, please sign below.**

**Signature:** \_\_\_\_\_

**Name:** \_\_\_\_\_