



# Salary Checklist

## End of Financial Year

Please ensure you attach all relevant documentation to this checklist, then sign and date below, and return your checklist and documentation to us. The effort you invest to complete this checklist will allow us to complete your accounts effectively.

UNIQsol

As per the terms of engagement attached, I/we hereby instruct you to prepare my taxation return/s for the year ended 30 June 2020.

I/We undertake to supply all information necessary to carry out such services, and will be responsible for the accuracy and completeness of such information.

You are hereby authorised to communicate with my bankers, solicitors, finance companies, insurance companies and all government agencies such as the ATO to obtain the information you require to enable you to carry out the above assignment.

Name:

Signature:

Date:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name:

Signature:

Date:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PART 1: Customer Details

### Preferred Method of Contact

*(Please ensure your contact details below are correct)*

Phone

Post when ready

Email when ready

### Are Your Contact Details Up to Date?

Have your contact details recently changed?

*If 'no' please proceed to Part 2*

Yes

No

If Yes, please indicate your correct contact details below:

Postal Address:

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Residential Address:

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Email:

Home Phone:

Business Phone:

Mobile:

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## PART 2: Bank Account Details

**Personal tax refunds from the Australian Taxation Office will be deposited directly in to your bank account. Please provide banking details for each individual.**

Account Name

BSB

Account Number

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### PART 3: Spouse Details

	Yes	No
Do we prepare your spouse's taxation return?	<input type="checkbox"/>	<input type="checkbox"/>

**Married / Defacto / Single** (Please Circle)

*If married/separated during the income tax year, please provide date* .....

Name	Occupation		
TFN	DOB	Taxable income	\$
Reportable fringe benefits	\$	Reportable super contributions	\$
Child support paid by spouse	\$	Net investment loss	\$
Does your spouse receive any Centrelink benefits?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
FTB A <input type="checkbox"/>	FTB B <input type="checkbox"/>	Other <input type="checkbox"/>	

Other benefits received, please provide details (including exempt benefits):

**Your spouse's details are very important to determine your eligibility for a number of tax offsets. Should we not be preparing your spouse's tax return the easiest way to obtain this information would be to provide a copy of their tax return.**

### PART 3: Dependant Children Details

	Name	DOB
Dependant 1		
Dependant 2		
Dependant 3		
Dependant 4		

## PART 4: Income

### *PAYG Payment Summaries*

Please attach summaries			<b>Yes</b> <input type="checkbox"/> <i>(Please attach or complete below)</i>	<b>No</b> <input type="checkbox"/>
Employer	Job title	Payment Summary Attached	Did you salary sacrifice super?	
		<input type="checkbox"/>		<input type="checkbox"/>
		<input type="checkbox"/>		<input type="checkbox"/>
		<input type="checkbox"/>		<input type="checkbox"/>

### *Centrelink PAYG Summaries*

Please attach summaries		<b>Yes</b> <input type="checkbox"/> <i>(Please attach)</i>	<b>No</b> <input type="checkbox"/>
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### *Other Salary Income*

Please attach summaries			<b>Yes</b> <input type="checkbox"/> <i>(Please attach or complete below)</i>	<b>No</b> <input type="checkbox"/>
From whom	Payment detail	Amount		
		\$		
		\$		
		\$		

### *Employer Lump Sum Payment and Employment Termination Payments*

Please attach summaries		<b>Yes</b> <input type="checkbox"/> <i>(Please attach)</i>	<b>No</b> <input type="checkbox"/>
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**Bank Interest**

				Yes	No
Please attach summary provided by financial institution or complete below				<input type="checkbox"/>	<input type="checkbox"/>
				<i>(Please attach or complete below)</i>	
Financial Institution	Account number	Total interest received	TFN withholding	Account holder name	
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		

**Dividends and Dividend Reinvestment Plans**

		Yes	No
Please provide share dividend notices		<input type="checkbox"/>	<input type="checkbox"/>
		<i>(Please attach or complete below)</i>	
<b>Company Name</b>			

**Employee Share Schemes**

		Yes	No
Please provide supporting documentation		<input type="checkbox"/>	<input type="checkbox"/>
		<i>(Please attach)</i>	

**Trust and Partnerships**

		Yes	No
Please provide annual tax statements or partnership taxation returns.		<input type="checkbox"/>	<input type="checkbox"/>
		<i>(Please attach or complete below)</i>	
<i>(Annual tax statements are usually issued in Aug/Sept)</i>			
<b>Trust / Partnership name</b>			

## Capital Gain

<b>Did you sell any assets such as shares, investments or property/land?</b> <i>(Please provide original purchase documents and sale documents)</i>	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
	<i>(Please attach or complete below)</i>	

### Assets sold


## Rental Income

Please attach income and expenditure summaries together with loan statements and real estate agents annual report	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
	<i>(Please attach or complete below)</i>	

### Property names


## Any Other Income

Any other income not already stated?	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
	<i>(Please attach or complete below)</i>	

From whom	Payment detail	Amount
		\$
		\$
		\$

## PART 5: Deductions

In order to claim a tax deduction you must have incurred the expense during the tax year. You must be able to substantiate any tax deductions via written evidence. Written evidence includes:

1. Evidence from a supplier (e.g. tax invoice)
2. Evidence recorded by the taxpayer for small expenses under \$10 in a diary
3. Evidence on a payment summary (issued from employer)

For any expenses which are part private in nature, the work related percentage must be substantiated via a usage diary.

	Yes	No
Have you <b>incurred</b> all expenses listed in the below section?	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No
Do you have <b>written evidence</b> to substantiate all expenses listed in the below section?	<input type="checkbox"/>	<input type="checkbox"/>

### Motor Vehicle

	Yes	No
Did you use your own car (less than 1 tonne carrying capacity or dual cab) for work purposes throughout the year? (This does not include home-to-work travel)	<input type="checkbox"/>	<input type="checkbox"/>

**If yes, please provide further information in each of the applicable following tables to allow us to calculate the best claim for you**

#### Section 1: Log Book

Please provide details of all expenses you incurred over the financial year, a copy of your log book showing 12 continuous weeks, tax invoice and finance documents on purchase.

Expense	Amount
Fuel	\$
Insurance	\$
Lease	\$
Registration	\$
Repairs & Maintenance	\$
Other Expenses	\$
Other Expenses	\$
Opening Odometer	Km
Closing Odometer	Km

## Section 2: Kilometres

The maximum the tax office allows you to claim is 5,000 km. Please ensure you have evidence to support this claim.

Make/Model	Rego No	Engine Size	Work Kilometres
		L	Km
		L	Km
		L	Km

## Work Related Travel Expenses

	Yes	No
Did you incur travel expenses in relation to your employment income or receive a travel allowance or use your vehicle ( <i>more than 1 tonne carrying capacity</i> ) to carry heavy or bulky equipment?	<input type="checkbox"/>	<input type="checkbox"/>

**If yes, please provide all of the following:**

## Section 1: Overnight Travel Expenses Incurred and Travel Allowance Details

Expense	Amount
Accommodation	\$
Overnight meals	\$
Parking & toll fees	\$
Public transport (including airfares)	\$
Other	\$

Allowance Type	Rate of Allowance	Amount	No. of Nights Away Overnight*	Did You Incur Expenses up to the Rate of this Allowance Amount?
<i>Eg. Travel</i>	<i>\$20/day or \$5/hr</i>	<i>\$100</i>	<i>5 nights</i>	<i>Y/N</i>
		\$	nights	
		\$	nights	<input type="checkbox"/>
		\$	nights	
		\$	nights	<input type="checkbox"/>

**\*Please only include nights where you were required to sleep away from home overnight.**



## Section 2: Use of Vehicle with more than 1 Tonne Carrying Capacity (Excluding Dual Cabs)

Complete this section if you use a utility/truck or vehicle exceeding one tonne capacity. Please provide details of all expenses you incurred over the financial year, including tax invoice on purchase and finance documentation.

Expense	Amount
Estimated private use	%
Fuel	\$
Insurance	\$
Lease	\$
Registration	\$
Repairs & Maintenance	\$
Other Expenses	\$
Other Expenses	\$
Opening Odometer	Km
Closing Odometer	Km

### Work Uniform

	Yes	No
Do you wear protective clothing or have to wear a logo on you uniform and incurred out of pocket expenses including dry cleaning?	<input type="checkbox"/>	<input type="checkbox"/>

**If yes, please complete the following:**

Detail of Expense	Registration No. with Aus Industry (ask your employer)	Compulsory	Amount
		<input type="checkbox"/>	\$
			\$
		<input type="checkbox"/>	\$

## Other Work Related Deductions

	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please provide supporting documentation <i>(Please attach or complete below)</i>		
Expense	Work Related Amount	
<b>Printing &amp; stationery</b>	\$	
<b>Work materials/tools under \$300</b>	\$	
<b>Union fees</b>	\$	
<b>Professional body memberships</b>	\$	
<b>Tax agent fees</b>	\$	
<b>Sickness/accident insurance</b>	\$	
<b>Income protection insurance</b>	\$	
<b>Donations</b> <i>(to deductible gift recipients)</i>	\$	
<b>Sun protection</b> <i>(sunglasses/sunscreen/broad brim hats)</i>	\$	
<b>Seminar &amp; self education expenses</b> <i>(related to your current employment)</i>	\$	
<b>Internet &amp; computer expenses</b> <i>(please ensure you have a work usage diary)</i>	\$	
<b>Telephone</b> <i>(please ensure you have a work usage diary)</i>	\$	
<b>Other:</b>	\$	
<b>Other:</b>	\$	
<b>Dedicated home office hours</b> <i>(separate room in house)</i>	Hrs	

## PART 6: Tax Offsets

### Private Health Insurance

	<b>Yes</b>	<b>No</b>
Please provide annual health fund statement	<input type="checkbox"/> <i>(Please attach)</i>	<input type="checkbox"/>

### Superannuation Spouse Contribution

	<b>Yes</b>	<b>No</b>
Please provide contribution notice	<input type="checkbox"/> <i>(Please attach)</i>	<input type="checkbox"/>

### Remote Zone Offset

	<b>Yes</b>	<b>No</b>
Did you live or work in a remote or isolated area of Australia?	<input type="checkbox"/> <i>(Complete below)</i>	<input type="checkbox"/>

**Town**

**Date Arrived**

**Date Departed**

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### HELP Debt

	<b>Yes</b>	<b>No</b>
<b>Do you have an accumulated HELP debt?</b> <i>(Please provide HELP information statement)</i>	<input type="checkbox"/> <i>(Please attach or complete below)</i>	<input type="checkbox"/>

## PART 7: Other Matters

### Child Support

	Yes	No
Have you paid child support?	<input type="checkbox"/>	<input type="checkbox"/>
<i>(Complete below)</i>		
Child Support you paid		\$

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### Other Details

**Please detail below any further information which may be relevant**

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*Information collected by UNIQsol may contain personal information. Please refer to our Privacy policy at [www.uniqsol.com.au](http://www.uniqsol.com.au) for information about how we handle your personal information, your rights to seek access to and correct personal information, and how to complain about breaches of your privacy.*

## TERMS OF ENGAGEMENT

This brochure is to confirm our understanding of the terms of our engagement and the nature and limitations of the services we will provide.

### Purpose, Scope and Output of the Engagement

UNIQsol will provide professional services which will be conducted in accordance with the relevant professional and ethical standards issued by the Accounting Professional & Ethical Standards Board Limited (APESB), and with the Tax Agent Services Act. The extent of our procedures will be limited exclusively for this purpose. As a result, no audit or review will be performed and, accordingly, no assurance will be expressed. Our engagement cannot be relied upon to disclose irregularities including fraud, other illegal acts and errors that may exist. However, we will inform you of any such matters that come to our attention.

The engagement will include the operations and procedures of the Client as agreed.

Our professional services are conducted and the tax return will be prepared for distribution to the relevant specific organisation or party for the purpose specified in the report or as agreed. We disclaim any assumption of responsibility for any reliance on our professional services to any party other than as specified or agreed, and for the purpose which it was prepared. Where appropriate, our report will contain a disclaimer to this effect.

### Responsibilities

In conducting this engagement, information acquired by us in the course of the engagement is subject to strict confidentiality requirements. That information will not be disclosed by us to other parties except as required or allowed for by law, or with your express consent.

Our involvement in this type of engagement will not disclose fraud, defalcations or other irregularities which may occur. However, any material weaknesses in the accounting or internal control systems which come to our notice will be drawn to your attention.

We wish to advise that our firm's system of quality control has been established and maintained in accordance with the relevant APESB standard. As a result, our files may be subject to review as part of the quality control review program of CPA Australia which monitors compliance with professional standards by its members. We advise you that by accepting our engagement you acknowledge that, if requested, our files relating to this engagement will be made available under this program. Should this occur, we will advise you.

Clients are responsible for the reliability, accuracy and completeness of the accounting records, particulars and information provided and disclosure of all material and relevant information. Clients are required to arrange for reasonable access by us to relevant individuals and documents, and shall be responsible for both the completeness and accuracy of the information supplied to us. Any advice given to the Client is only an opinion based on our knowledge of the Client's particular circumstances.

*A taxpayer is responsible under self assessment to keep full and proper records in order to facilitate the preparation of a correct return. Whilst the Commissioner of Taxation will accept claims made by a taxpayer in an income tax return and issue a notice of assessment, usually without adjustment, the return may be subject to later review. Under the taxation law such a review may take place within a period of up to 5 years after tax becomes due and payable under the assessment. Furthermore, where there is fraud or evasion there is no time limit on amending the assessment. Accordingly, you should check the return before it is signed to ensure that the information in the return is accurate.*

*Where the application of a taxation law to your particular circumstances is uncertain you also have the right to request a private ruling which will set out the Commissioner's opinion about the way a taxation law applies, or would apply, to you in those circumstances. You must provide a description of all of the facts (with supporting documentation) that are relevant to your scheme or circumstances in your private ruling application. If there is any material difference between the facts set out in the ruling and what you actually do the private ruling is ineffective.*

*If you rely on a private ruling you have received, the Commissioner must administer the law in the way set out in the ruling, unless it is found to be incorrect and applying the law correctly would lead to a better outcome for you. Where you disagree with the decision in the private ruling, or the Commissioner fails to issue such a ruling, you can lodge an objection against the ruling if it relates to income tax, fuel tax credit or fringe benefits tax. Your time limits in lodging an objection will depend on whether you are issued an assessment for the matter (or period) covered by the private ruling.*

#### Period of Engagement

This engagement will start upon acceptance of the terms of engagement by the Client in line with this brochure. We will not deal with earlier periods unless the Client specifically asks us to do so and we agree.

#### Fees

The fee arrangement is based on the expected amount of time and the level of staff required to complete the services as agreed.

Fee invoices will be issued in line with a billing schedule advised to the Client.

#### Limitation of Liability

Our liability is limited by a scheme approved under Professional Standards Legislation. Further information on the scheme is available from the Professional Standards Councils' website:  
[www.professionalstandardscouncil.gov.au](http://www.professionalstandardscouncil.gov.au).

#### Ownership of Documents

All original documents obtained from the client arising from the engagement shall remain the property of the client. However, we reserve the right to make a reasonable number of copies of the original documents for our records.

Our engagement will result in the production of *electronic documents, which will be supplied to the client, such as income tax returns and/or financial statements*. Ownership of these documents will vest in you. All other documents produced by us in respect of this engagement will remain the property of the firm.

The firm has a policy of exploring a legal right of lien over any client documents in our possession in the event of a dispute. The firm has also established dispute resolution processes.

#### Confirmation of Terms

Acceptance of our services in conjunction with this information brochure indicates that you understand and accept the arrangements. This information will be effective for future engagements unless we advise you of any change.