

ANNUAL QUESTIONNAIRE
TRUST 2017

Client

Balance Date/...../.....

Telephone Number Cell phone Number

Email

Physical Address.....
(Include RAPID Number and postcode)

Engagement of Professional Services

Campbell & Co Chartered Accountants Limited agrees to provide the following professional services:

- Preparation of financial reports and tax returns based on information provided to us in accordance with SES-2. Our procedures do not include verification of financial information. No audit or review engagement is undertaken.
- We will report on any matters that come to our attention in the process of undertaking your work that will be of benefit to you.
- We will provide any other services as are agreed upon between us from time to time.

You agree and confirm:

- You will supply all information necessary to carry out such services and will be responsible for the accuracy and completeness of such information.
- We may obtain any further information necessary for the completion of your engagement from any third party you had dealings with during the year for the named above or other entities that you have interests in that effect the financial reports. This will normally be financial institutions and legal firms.
- To authorise Campbell & Co Chartered Accountants Limited to link to all tax types (except child support) at the Inland Revenue Department and to obtain information through all media and communication channels necessary to fulfil the agency responsibilities as our accountant and tax agent. We will not be liable for any penalties imposed by IRD as a result of incomplete records supplied to us.
- To authorise Campbell & Co Chartered Accountants Limited to access and change information through ACC Online and directly with ACC staff.

Price and Payment

Our fees are based on hours worked charged at rates appropriate to the work performed and the levels of expertise required, plus out of pocket expenses. If requested by you we will advise you of our estimated fee for the work to be undertaken. If our costs seem likely to exceed this figure, we will discuss the matter within a reasonable timeframe.

Our fees are payable by the 20th of the month following the invoice date. In event that it is necessary to take legal action to recover overdue accounts, all legal costs incurred by us will be incurred by you.

Signature: _____

Full Name: _____

Date Completed: ____/____/____

CAMPBELL & CO CHARTERED ACCOUNTANTS LIMITED
PHONE: 03 974 9211
WEB: www.campbellca.co.nz
EMAIL: admin@campbellca.co.nz
P O Box 257, Kaiapoi 7644

CHECKLIST OF RECORDS TO BE SUPPLIED TO COMPLETE THE FINANCIAL STATEMENTS:	Tick if applicable
Cash Book Please supply a back-up of your electronic cashbook if you use one. Please also advise the password if applicable. You can e-mail a back-up to admin@campbellca.co.nz if you prefer.	
Bank Statements <ul style="list-style-type: none"> For all accounts operated by the Trust. Statements should cover the full period plus one month after balance date. Please obtain any missing statements from your bank. All cheque books and deposit books. You can note income or withdrawal details on the bank statements, including automatic payments, if this is preferred. 	
GST Returns Please supply your copies of all GST returns and workings for the year	
Term Loans/Hire Purchase Agreements Please supply all loan statements and new hire purchase agreements.	
Insurance Please supply the premium summary and a copy of any invoices for insurance. If the Trust received any insurance claim during the year please include copies of the documentation.	
Interest Certificates These are normally sent by banks in April each year or maybe available from your online banking facility.	
Dividend Certificates Please provide all dividend certificates received, including details of shares received in lieu of dividends.	
Rates/Government Valuations Please supply a copy of the Rates notice or Government Valuation notice if there has been an updated valuation issued during the year.	
Gifting Please supply details of any gifting received by the Trust.	
Solicitor's Invoices (To enable analysis of legal fees) Please supply all invoices for legal services	
Major Transactions Please supply documentation and invoices relating to any major transactions such as the sale or purchase of significant assets or property. This will ensure that we treat this expenditure correctly and maximise the depreciation claim.	

NEW ASSETS PURCHASED OR CAPITAL IMPROVEMENTS

Asset Description	Total Paid	Date	Details of Any Asset Traded In
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Please supply Hire Purchase Agreements if applicable).

PARTICULARS OF ASSETS SOLD OR SCRAPPED DURING THE YEAR

(Please refer to your last years fixed asset and depreciation schedule included with your financial statements)

Asset Description	Date Sold	Total Received	Tick if Scrapped	Details of Replacement Asset if Traded
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

INTEREST PAID TO FAMILY MEMBERS

Please provide details of interest paid to family members:

Name: _____ Amount Paid: _____

Name: _____ Amount Paid: _____

Please also supply copies of any Resident Withholding Tax returns filed with Inland Revenue

CLAIM FOR OTHER EXPENSES

In the event of deductible expenses being paid in cash or from a personal account, please supply details, as these items can be included as a deductible expense if they are business related, examples maybe newspapers, taxi fares, car parking etc.

CASH INCOME NOT BANKED DURING THE YEAR

Please provide details of cash received but not paid into your bank account.

_____ \$ _____

GENERAL

Is there a specific date that you require your accounts completed by? _____/_____/_____

Would you like a draft copy of the financial statements before they are finalised? YES / NO

Would you like us to supply a copy of your financial statements to the bank? YES / NO

Who is your bank manager? _____

Branch Address: _____

How many copies of the financial statements would you like?

WORKING FOR FAMILY TAX CREDITS (WFFTC)

Do you have children aged under 18 years or 18 years and attending secondary school or territory education? YES/NO

If YES, please complete the following:

Family Details;

<u>Name of Child</u>	<u>Date of Birth</u>	<u>IRD Number</u>	<u>Date Left School</u>
.....	.../.../.....-.....-...../...../.....
.....	.../.../.....-.....-...../...../.....
.....	.../.../.....-.....-...../...../.....
.....	.../.../.....-.....-...../...../.....

There has been changes to the legislation to the types of income now included in your family income when applying or receiving WFFTC. As the changes affect your WFFTC claim, we require details of all family income.

Have you received any income from any other sources that we don't administer? YES/NO

Other Trust Income	YES/NO
Other Shareholder Income	YES/NO
Interest or Dividends (including PIE Income)	YES/NO
Fringe Benefits	YES/NO
Passive income of your children	YES/NO
Any payments used for day to day living expenses	YES/NO

PARENTAL TAX CREDITS

You may be entitled to a Parental Tax Credit if you have had a new child. If so your new child will require an IRD number. To apply for an IRD number, please print off an IR 595 from the IRD website, or contact us and we can attend to this.

Have you had a baby during the previous year? YES/NO

If YES, have you applied for Parental Tax Credit? YES/NO

WFFTC money received during the year.

Did you receive WFFTC during the year? YES/NO

If YES, How much did you receive? \$.....

Family Changes

Has there been any in in your marital status (this includes defacto) during the previous year? YES/NO

Has there been a shared custody arrangement YES/NO

Child Support

Did you pay child support to an ex-partner? YES/NO

If Yes, How much did you pay? \$.....

Was this arrangement through IRD or Private? (Please circle) IRD / Private

Did you receive child support form an ex-partner? YES/NO

If YES, how much did you receive? \$.....

In Work Payment

You may be entitled to an In Work Payment depending on the weekly hours worked

In a single parent family you need to work more than 20 hours, for a two parent family you need to work more than 30 hours per week combined.

Does your family meet these requirements? YES/NO
If YES, provide number of hours worked. Parent 1. Parent 2.

If your spouse files his/her own tax return, we will need a copy of this return to calculate the total family income.

TAX CREDITS FOR DONATIONS

- Total amount of your Donations to Charities
(Please staple your donation receipts to the back of this form) \$ _____
- Enter the bank account number you would like your rebate and any tax refund to be direct credited to:
(The Inland Revenue may also transfer the rebate credit against any tax arrears you have.)

Bank	Branch	Account Number	Suffix
------	--------	----------------	--------

TAX REFUNDS

- Enter the bank account number you would like your tax refund to be direct credited to:

TRUST ADMINISTRATION

We appreciate that in most instances we may have attended to the necessary documentation. However because of the potential income tax implications of not documenting such matters on a timely basis, please answer the following questions, details can be added in the Notes section below:

Have there been any changes in Trustees during the year? YES / NO

Have there been any major changes to the Trust's activities?	YES / NO

Have there been any distributions of cash, investments or property to Beneficiaries during the year? YES / NO

Have there been any advances to Trustees or Beneficiaries during the year? YES / NO

Has the Trust received any gifts in reduction of debt during the year? YES / NO

Does the Trust have a Memorandum of Wishes? YES / NO

If Yes, when was it last reviewed? _____

ACC

Please provide details of all entities that you make payments for to ACC.

Company/Individual/Trust

ACC Number:

NOTES

.....

.....

.....

.....

.....

.....

.....

.....

.....