ANNUAL RECORDS CHECKLIST



2011 Financial Year

The checklist is in several parts as detailed below. Please complete all of the required sections. The other sections only need to be completed if they apply to your business.

| Section | Status |
|--|------------------------|
| Update Personal Details | Required (Page 2) |
| Records Required – Business Information | Required (Pages 3 - 4) |
| General Information | Required (Page 4) |
| Records Required – Investor & Other Information | Required (Page 5) |
| Supporting Schedules | |
| Accounts Receivable / Accounts Payable | |
| (Form A) | If Applicable (Page 6) |
| Sale or Purchase of Assets (Form B) | If Applicable (Page 7) |
| Rental Property Checklist (Form C) | If Applicable (Page 8) |

Please complete the Authorisation below as this authorises us to contact necessary organisations, for example your bank or insurance company, to obtain information that is required to complete your accounts or taxation returns.

Authorisation

The attached Schedules of information and **enclosed** Accounting Records represent all our business transactions for the 2010/2011 financial year. I/We authorise *Young Read Woudberg Limited* to compile Financial Statements from the records and data supplied. Unless otherwise agreed, we agree to *Young Read Woudberg Limited's* standard memorandum of engagement terms, which are available at www.yrw.co.nz.

The Financial Statements are to be compiled as Special Purpose Financial Statements tailored to meet my/our specific information needs. General purpose Financial Statements will be compiled where I am/we are unable to elect, or contract for, the preparation of special purpose reports.

I/We do not require Young Read Woudberg Limited to complete an audit or review.

I/We accept responsibility for the accuracy and completeness of all records and information supplied to Young Read Woudberg Limited.

Young Read Woudberg Limited are hereby authorised to communicate with my Bankers, Solicitors, Finance Companies, Inland Revenue Department, Accident Compensation Corporation and other persons or organisations to obtain such further information as they may require in order to carry out the above assignments in respect of all our business and taxpayer entities.

| Entity Name | | |
|--------------------------------|---|---|
| Person to Contact with Queries | | |
| Phone Number | | |
| CLIENT SIGNATURE | * | * |
| Date | | |

Update of Personal Details



| Preferred Postal Address | |
|------------------------------|--|
| Business Physical Address | |
| Home Address | |
| Email Address | |
| Home Phone | Fax |
| Work Phone | Mobile |
| Name | Date of Birth |
| Name | Date of Birth |
| | (Your date of birth is useful as it can help with tax planning / retirement planning issues) |

Working for Families

| 1) | Do you have any Children under 18 years of age and still at school? If yes, please complete the following: | | | | | No |
|----|---|--|-------------------------|---------------------|------------|----------|
| | Name of Child | Date Left School (if applicable) | Date of Birth | IRD Number | | |
| 2) | If yes, provide full detail | ge in family circumstances? s e.g. y arrangements | | | Yes | No |
| 2) | Your relationsl commenced or | nip with your spouse or partner ended during the year. Provid | | or defacto partner) | | |
| 3) | Working for Families 1 Have you received any Attach certificate from Ir | | | | Yes \$ | No |
| 4) | Child Support Have you received / pai | d any Child Support during the | year? | | Yes \$ | No |
| 5) | If you are in a two parer | rent family do you work more the st family are your combined ho se or partner started or stopped | urs of work more than 3 | 30 hours per week? | Yes Yes | No No |

RECORDS REQUIRED



Business Information

Please provide the following information (where applicable)

| 1) | Accounts Receivable | Yes | No |
|----|--|-----|----|
| | Do you have any accounts receivable as at your balance date? (Money owing to you.) | | |
| | (IF YES, COMPLETE FORM A) | \$ | |
| 2) | Accounts Payable | Yes | No |
| | Do you have any accounts payable as at your balance date? (Money you owe to others.) | 163 | NO |
| | (IF YES, COMPLETE FORM A) | | |
| 3) | Bank Statements | | |
| | A copy of the bank statements covering balance date | Yes | No |
| 4) | GST Returns | | |
| | A copy of GST Returns | Yes | No |
| 5) | Loans / Hire Purchases | | |
| | Have you taken out a new loan, hire purchase or lease-to-own agreement since your last | | |
| | balance date? | Yes | No |
| | If yes, please provide loan balances as at balance date, statements, summaries and / or documentation of the new agreements or any change in borrowings. | | |
| 6) | Sale / Purchase of Assets | | |
| | Did you sell, purchase or stop using any assets in your business in the past year? | Yes | No |
| | (IF YES, COMPLETE FORM B) | | |
| 7) | Copies of invoices for: | | |
| | Legal expenses | Yes | No |
| | Repairs & Maintenance – items costing > \$500 | Yes | No |
| | Insurance | Yes | No |
| 8) | Other Source Records: | | |
| | Invoices / Statements | Yes | No |



| 9) | Property Transactions: | | |
|-----|--|-----|----|
| | Copies of : | | |
| | Sale & Purchase Agreements | Yes | No |
| | Legal Statements | Yes | No |
| 10) | Office of Home (Workshop | | |
| 10) | Office at Home / Workshop | | |
| | Did you use any part of your home or garage to store business related tools, vehicles, financial records or to prepare your books? | Yes | No |
| | | | |
| | If yes, please provide the following: | | |
| | Area of housesqft/m Area of Basement/Garagesqft/m | | |
| | Area used for Business: | | |
| | Officesqft/m Workshopsqft/m Garage/Storagesqft/m | | |
| | Household Expenses: | | |
| | Interest paid on mortgages \$ | | |
| | Rent paid (if house rented) \$ | | |
| | Rates (including water rates) \$ | | |
| | Power (Electricity and Gas) \$ | | |
| | Repairs to office / workshop \$ | | |
| | Insurance (House & Contents) \$ | | |
| | Any other house expenses - specify \$ | | |
| | | | |

General Information

Please complete if applicable

| 1) | Would you like us to forward a copy of your Financial Statements to your bank? Name of Bank Contact Person | Yes | No |
|----|--|-------------------|----------------|
| 2) | Have you updated your Wills within the last 5 years? Have you given anyone your Powers of Attorney If so, please provide details Would you like us review Estate Planning / Asset Protection issues ? | Yes Yes Yes | No No No |
| 3) | Would you like to be contacted about your GST Returns being prepared by us? | Yes | No |



Investor and Other Information

| 1) | Income | | | | | | |
|----|-------------------------------|------------------------------|-----------------------|--------------------|-----|----|--|
| | Did you receive any income | e from paid wages / supera | nuation? | | | | |
| | If yes, the IRD will send us | your Summary of Earnings | automatically. | | Yes | No | |
| 2) | Rebate Information | Rebate Information | | | | | |
| | Donations / Childcare | / Housekeeper | | | | | |
| | Please attach receipts | | | | Yes | No | |
| 3) | Other Income | | | | | | |
| | Did you receive any other in | ncome, for example from es | states or trusts, ann | uity or pensions ? | Yes | No | |
| | If yes, attach a copy of sup | porting documentation | | | | | |
| | Person Receiving Income | Source / Type of Income | Gross | Tax Paid | | | |
| | | | \$ | \$ | | | |
| | | | \$ | \$ | | | |
| | | | \$ | \$ | | | |
| | | | * | * | | | |
| 4) | Portfolio Summary Repor | ts | | | | | |
| | Do you use an investmen | t manager or advisor? If | yes, please provi | de a copy of any | Yes | No | |
| | portfolio summary reports re | eceived in respect of the ye | ar. | | | | |
| 5) | New Zealand - Interest / D | ividends / Portfolio Inves | tment Entities (PI | E) Income | | | |
| | Did you receive any income | from these sources? | | | Yes | No | |
| | If yes, please provide advic | e notices | | | | | |
| 6) | Overseas - Interest / Divid | lends / Other Income | | | | | |
| | Did you receive any income | from these sources? | | | Yes | No | |
| | If yes, please provide incon | ne distribution details | | | | | |
| | We also require the following | ig information for each sha | eholding: | | | | |
| | | y and the number of shares | held | | | | |
| | | Shares as at 1 April 2011 | | | | | |
| | | ation of all sales & purchas | es | | | | |
| | Details of share reinve | estments | | | | | |
| | Do you have any interest in | a foreign life insurance pol | icy or super schem | e? | Yes | No | |
| | If yes, please provide detail | S | | | | | |
| 7) | Rental Income | | | | | | |
| | Did you receive any rental i | ncome? | (IF YES, CON | IPLETE FORM C) | Yes | No | |
| 8) | Income Protection Insura | nce | | | | | |
| | Do you have Income Protect | ction Insurance? | | | Yes | No | |
| | If yes, please attach a copy | of the invoice. | | | | | |
| 9) | Kiwi Saver | | | | | | |
| | Do you belong to Kiwi Save | r? | | | Yes | No | |
| | If yes, Name of Provider | | | | | | |

ACCOUNTS RECEIVABLE (Debtors)

These are sales or services that you have performed and invoiced up to and including the last day of the financial year that you are yet to receive payment for.

| Name | Details | Ledger Code | GST Exclusive Amount | GST | GST Inclusive Amount |
|---------------------------|---------|----------------|-------------------------|-----|-------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| TOTAL ACCOUNTS RECEIVABLE | | | \$ | \$ | \$ |

ACCOUNTS PAYABLE (Creditors)

These are invoices for expenses dated up to and including the last day of the financial year you have received but have not yet paid.

Please ensure that the details column is filled out, eg purchases, motor vehicle, power etc.

| Name | Details | Ledger Code | GST Exclusive Amount | GST | GST Inclusive Amount |
|------------------------|---------|----------------|-------------------------|-----|-------------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| TOTAL ACCOUNTS PAYABLE | | | \$ | \$ | \$ |

NAME: _____

Please look at the final page of your previous year's set of financial statements and note any assets below that you are no longer using in the business.

ASSETS NO LONGER USED

| <u>Asset</u> <u>Code</u> | Item Name |
|-----------------------------|-----------|
| | |
| | |
| | |
| | |
| | |
| | |

Please supply any documentation that was required for the sale or purchase of an asset, eg hire purchase agreements, invoices.

ASSETS PURCHASED/SOLD

| Date | Asset | Sale/Cost Price GST Exclusive | New or Used | Purchase/ Sale | How Financed |
|------|-------|----------------------------------|----------------|-------------------|--------------|
| | | | | | |
| | | | | | |
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Rental Property Check List

| Owner Name / Entity: Address of Property: | | | |
|--|---|-------------------|----------------|
| | | | |
| \$ | | | |
| \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | | |
| If yes, e Proper Is this t | ty Purchased or Sold during year: enclose: Sale & Purchase Agreement Solicitor's Legal Statements ty Details: ne first year you have owned or rented this property? If yes, please attach: Valuation (QV / market) s Purchased: Please attach details of Chattels purchased (nature, cost, acquisition date)) | Yes Yes Yes | No No No |
| GST Re | Are you registered for GST for this property? If yes, please attach GST Returns and Workpapers including workpaper for change in GST rate adjustment 30 September 2010 | Yes | No |