



## CHECKLIST 2014

Name:		Tax File Number:
Date of Birth:		
Address:		
Telephone Home:		
Telephone Work:		
Telephone Mobile:		
Email:		
Facsimile:		
Bank account details are required as the ATO will no longer be issuing cheques.	Bank Account Details for direct deposit of refund:	
	Name Held:	
	BSB:	
	Account Number:	

[illegible]

Get updates via our facebook presence: [www.facebook.com/mulcahyandco](http://www.facebook.com/mulcahyandco) 

## OTHER INFORMATION

Private Health Insurance (attach Private Health Insurance Tax Summary)  
HECS/HELP Liability (attach HECS statement)  
Student Loan (attach SFSS statement)  
Payslip(s) (attach most recent payslip received)  
Superannuation (attach most recent statements received)  
Personal Insurance (attach most recent statements received for Life, trauma,  
TPD and income protection insurance)  
  
Family Tax Benefit Entitlement (if not previously provided)  
Spouse Name:  
Date of Birth:  
Tax File No:  
Taxable Income:  
Children 1 Name:  
Children 1 Date of Birth:  
Children 2 Name:  
Children 2 Date of Birth:  
Children 3 Name:  
Children 3 Date of Birth:  
Children 4 Name:  
Children 4 Date of Birth:

[illegible]

## WORK RELATED EXPENSES

## I. WORK RELATED CAR EXPENSE

Please explain how your car is used for work related purposes: (refer to our website for explanation of how cars can be claimed)

Car Type	Engine Capacity	Car Price	Work related KMS for year

If using logbook method, please also fill out the following:

Type of Expenses			Total Expense \$	Work % (c)	Amount Claimed	Invoice/ Receipt Y/N
Total kms travelled		a				
Total work kms travelled		b				
Work related % (a / b =c)		c				
Fuel and Oil						
Lease Payments						
Interest						
Insurance						
Registration						
Repairs & Maintenance						
Other:						

## 2.WORK RELATED TRAVEL

[illegible]

### 3. UNIFORM, OCCUPATION SPECIFIC OR PROTECTIVE CLOTHING AND LAUNDRY EXPENSES

[illegible]

4. SELF-EDUCATION EXPENSES. Please give details of course and how it relates to your current work activities:

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[illegible]

**5. OTHER WORK RELATED EXPENSES**

Type of Expense	Amount Claimed \$	How is expense work related?	Invoice/ Receipt (Y/N)
Books and Journals			
Computer Expenses			
Home Office Expenses			
Home Telephone			
Internet Access			
Memberships			
Mobile Phone			
Seminars			
Subscriptions			
Union Fees			
Other...			

**6. DONATIONS**

Charity Details	Amount Claimed \$	Receipt Y/N

**7. SUNDRY**

Details	Amount Claimed \$	Receipt Y/N
Tax Agent Fees		
Tax Agent Travel		
Investment Expenses		
Income Protection Ins.		

**8. OTHER CLAIMS**

Claim	Amount \$	Additional Details	Receipt Y/N
Medical Expenses (if over \$2,120)			

## NON TAX RELATED QUESTIONS

Are you aware that Mulcahy & Co has a legal division to assist with all your legal needs?

Do you have an up to date Will?

If No, would you like Mulcahy & Co Legal to contact you to discuss?

If Yes, do you want Mulcahy & Co Legal to obtain this to hold on your behalf?

Do you have an appropriate level of risk insurance ie life, trauma, income protection insurance?

Have you reviewed your superannuation fund investments recently?

Do you have a regular savings plan?

If No, would you like to?

Do you want to know if your paying too much on your loan?

If so, please provide your latest loan statements

Do you require IT assistance? New computer, back-up,  
cloud data storage, virus protection, networking etc.

Yes	No

### Declaration:

I declare that the information I have given is true & correct and that I hold the necessary written evidence to support my work related deductions. I have made the necessary inquiries to ensure all expenses listed are deductible.

Signed:

Date:

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Go to **[www.mulcahy.com.au](http://www.mulcahy.com.au)** to view and download further information and checklists relevant to your financial planning, lending, legal and IT requirements.

## RENTAL PROPERTY WORKSHEET FOR THE 2014 FINANCIAL YEAR

(Refer to our website for information concerning your obligations with rental property claims)

Taxpayers Name: \_\_\_\_\_ Address of Property: \_\_\_\_\_

Date that first income producing: \_\_\_\_\_

Number of weeks property was rented this year: \_\_\_\_\_

*If property was purchased or sold during the year, please provide purchase & sale contracts*

Was there any private use of the Property? Yes \_\_\_\_ No \_\_\_\_

Income	Amount	Details
Gross Rental Income		
Other related Rental Income (eg. Insurance Recoup)		
<b>TOTAL INCOME</b>		
<b>EXPENSES</b>		
Advertising to tenants		
Body Corporate Fees		
Borrowing Expenses		
Cleaning		
Council Rates		
Capital allowances (depreciation on plant)		
Gardening / lawn mowing		
Insurance		
Interest on loan(s) (Please provide Loan Statements)		
Account Number		
Land Tax		
Legal Fees		
Pest Control		
Property agent fees/commission		
Repairs and Maintenance		
Capital works deducitons (special building write off) (2.5% x \$ )		
Stationery, telephone, postage		
Travel expenses		
Water charges		
Sundry rental expenses		
<b>TOTAL RENTAL PROPERTY EXPENSES</b>		
Less: Private component		
How is this calculated?		
<b>NET RENTAL INCOME / LOSS</b>		
Travel Details:		

ASSET AND LIABILITY AND SURPLUS CASHFLOW AVAILABILITY

Updating your net equity and cashflow position can provide useful information with investment and financial decision making.

Please take the time to update these details.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

ASSETS		Value	LIABILITIES		
Details			Details	Monthly Payment	Owing
Bank Account(s)			Mortgage/Loans		
Term Deposits					
Real Estate	Address/Type				
Motor Vehicles					
Shares / Man Fund					
Superannuation (attach statements)					
Household / Personal			Other		
Other					
TOTAL ASSETS			TOTAL LIABILITIES		
NET WORTH (assets less liabilities)					



# MULCAHY & CO

Reliable, accessible, responsive...it all adds up to a quality outcome

INCOME			EXPENSES		
Salary / Wage Income	Gross	After Tax	Loan Repayments		
Name:					
Name:					
Interest Income:					
Dividends / Managed Funds			Living & Private		
Rental			Superannuation-Extra		
Gross			Superannuation-Co-Contribution		
Expenses					
Net Rental Income (loss)					
			Personal Insurance		
			Life/TPD/Trauma/IP		
Other					
TOTAL INCOME			TOTAL EXPENSES		
NET INCOME (EXPENSES)					

Please fill in the form on screen, save the PDF document to your hard drive and email back to us.

● ACCOUNTING ● FINANCIAL PLANNING ● LENDING

● LEGAL ● INFORMATION TECHNOLOGY

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