**Individual Tax Return Questionnaire** 



Year Ended 30<sup>th</sup> June 201\_ (Enter Year)

Here's a checklist to help you gather the receipts, tax invoices and supporting documentation you'll need to do your tax return. You may email or post this prior to your appointment. Feel free to contact us if you have any queries

**TO:** PFG Accountants & Advisors

ATTENTION:		E-MAIL:	info@pfgaccountants.com.au
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INFORMATION FOR TAX RETURN												
Name:					Spouse Name:							
DOB:					Spouse DOB:							
Address:			Postal		Postal Address:	ostal Address:						
TFN:					Email:							
Phone:	W						м					
CHILDREN			<u>I</u>	L	L			1	L			
Name: N					Name:	ame:						
DOB:				DOB:								
School: Primary/Secondary			School:		School:		Primary/Secondary					
Education Costs:			Edu		ducation Costs:							
Name:						Name:						
DOB:						DOB:						
School:	Prim	ary/Secondary			School:		Primary/	Secondary				
Education Costs:				Education			::					
PAYG PAYMENT SUMMARIES (Please Attach or Fax All Slips)												
Emplo	oyer:		Occupation:			on:		Gross:		Tax:		
							\$			\$		
						\$			\$			
						\$			\$			
BANK INTEREST												
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