

Client Name:	

Account Number:

If any of the following has changed since last year, please provide:

Contact Information:					
Address:					
Phone:					
Email:					
Bank Account deta	ails for IRD refunds:				
Account Name:					

Information Required (if applicable) for period 01/04/2024 – 31/03/2025

		Enclosed	N/A
•	Dividends Received (attach dividend statements)		
٠	Interest Received (attach RWT Certificates)		
•	Income Protection Insurance Premiums paid (please include		
	statements)		
•	Receipts for Donations Paid		
•	Superannuation (if overseas)		
•	Any other income you received that was not lodged with IRD		
•	Working for Families (if applicable please fill in page 2. If this section is		
	not completed, we are unable to calculate your Working for Families)		
•	Provide details of any Crypto or Digital Assets you may own		
•	Provide details of any offshore bank accounts, borrowings, property,		
	investment income or interests in overseas trusts, overseas		
	superannuation and insurance policies		



Working for Families		Yes	No
Spouse's Name:		Spouse's IRD Number	:
Child's Name	DOB	IRD Number	Shared Custody Y / N and if so, how many days?
Other Payments		 Y/N	Total \$
	-bat ic ı	-	i otai ș
Please provide details of any other income received t			
calculate working for families. This includes other pa		s in excess	
of \$5,000 per annum used for the family's living expe	enses.		

I confirm that the information provided is true and correct and I authorise Evans & Co Accountants Ltd to use this information in the preparation of my/our Financial Accounts and Tax returns.

Signed: _____

Name: _____

Date: _____