info@safrata.com.au

+61 411 540 275

INDIVIDUAL TAX RETURN INFORMATION FORM

PERSONAL INFORMATION

I hereby provide my consent to Safra Tax & Accounts to be registered as a client on the ATO Tax Agent Portal and access the information available therein

| First Name | Surname | | | | |
|--|---------|----|--------------------|--------|------|
| Date of Birth | Day | | Mth | | Year |
| | | | | | |
| Current Residential Address | | | | | |
| Post Code | | | | | |
| | | | | | |
| Tax File Number | | | | | |
| Phone Number | | | | | |
| E-mail address | | | | | |
| | | | | | |
| Date of arrival in Australia | | | | | |
| Country of residence immediately before arriving | | | | | |
| Time spent in that country | Years | | | Months | |
| Permanent resident / citizen? | Yes | No | | | |
| Have you applied for permanent residency? | Yes | No | Date Application L | odged | |
| Which visa did you hold in the financial year? (list all if more than one) | | | | | |
| Bank Account | Number | | | BSB | |
| Bank Account Name | | | | | |



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INDIVIDUAL TAX RETURN INFORMATION FORM

INCOME DEDUCTIONS / DETAILS

Occupation

Financial year this form relates to

Type of Income Earned Employment Income (PAYG) Bank interest

Dividends Capital gain (sale of shares or CGT asset)

Rental income Sole trader / ABN type of income

Sale of cryptocurrencies

Work Related Expenses Car / taxi / public Laptop / computer

Mobile phone Internet

Home office Professional memberships

Donations / education / courses Loan interest

Laundry / uniform Stationery

other

Private Health Insurance Yes No

Married / DeFacto partner Yes No

First name of Partner Last name of partner

Partner's Date of Birth Taxable Income in the financial year

Other comments you wish to add