

### Finalise T.O.E.

Instructions: Accountant to complete the first page details including date of questionnaire, client name, phone, balance date, email & make any required changes to Terms of Engagement then click the orange Finalise T.O.E. button. This will set those fields to read only and will remove these instructions and the button.

### Financial Statements Questionnaire -

Ensure this questionnaire is completed and included with your records

| Client Name:  | Phone: |  |
|---------------|--------|--|
| Balance Date: | Email: |  |

#### To: [Firm Name]

#### **Terms of Engagement**

I/We hereby instruct you **APEX ACCOUNTANCY LTD** and staff/contractors as applicable to prepare my/our Financial Statements and Taxation Returns for the year/period ending **[Balance Date]**. I/We undertake to supply all information necessary to carry out such services and will be responsible for the accuracy and completeness of such information. I/We understand that you will rely upon the information provided by me/us. Your services are not intended to, and accordingly will not result in the expression by you of an opinion on the Financial Statements in so far as third parties are concerned, or in the fulfilling of any statutory audit requirements. I/We understand that during preparation of the Financial Statements and Taxation Returns you will not be specifically investigating non-compliance with laws and regulations – however, should anything come to light of this nature during this process, you will bring that to my/our attention.

I/We understand that the Financial Statements and Taxation Returns are prepared for my/our own use and to determine my/our taxation liabilities. If this should change in any material respect, I/we will inform you immediately. You will not accept any responsibility to any person, other than me/us, for the contents of the Financial Statements.

All other terms and conditions of this engagement are the same as those referred to in the original Engagement Letter I/we signed when I/we became a client.

I/We also accept that you have the right to charge interest on overdue accounts at the rate of 1.5% per month, and that all accounts are due for payment by the 20th of the month following invoice date. The charging of such interest will be at your discretion. I/We accept that any collection costs you incur will be fully recoverable from me/us.

Authority is given to obtain information from Inland Revenue, other government agencies and financial institutions about all tax types (except child support), bank and loan accounts in order to complete the above assignments. This includes obtaining information through all Inland Revenue media and communication channels including electronic ones.

I/We have also instructed you to prepare our GST Returns on a regular basis. I/We accept that it is my/our responsibility to advise you of all relevant transactions on a timely basis as well as obtain valid tax invoices that comply with the GST legislation.



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I/We authorise your organisation to act as our agent for ACC levy purposes for all associated entities. This authorisation allows your organisation to query and change information on my/our ACC levy account(s) through ACC staff, and through MyACC for Business. This authority will also allow your organisation's main representative discretion to delegate access to my/our ACC information to other members of your organisation. Other delegated members of your organisation will also be able to query and change information on my/our ACC levy account.

You are to represent me/us as my/our tax agent. All income tax returns will be signed by me/us however you are authorised to sign any other taxation return on behalf of myself/ourselves or any of my/our associated entities.

| Name | IRD Number | Signature | Date |
|------|------------|-----------|------|
|      |            |           |      |
|      |            |           |      |
|      |            |           |      |
|      |            |           |      |
|      |            |           |      |

Client Questionnaire Business we do GST.doc

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Level 3, Craigs Investment Building Mountain Club, 36 Grant Road Five Mile Center, Queenstown 9300



| Under the Companies Amendment Act 2014 there is now a requirement for all directors to provide their place of birth and date of birth AND in addition, there must be at least one director that either lives in New Zealand; or lives in Australia and is a director of a company incorporated in Australia: |                                                                                         |  |  |  |  |  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|
| Director                                                                                                                                                                                                                                                                                                     | Director Date of birth City / Town of birth Country of birth Current residential addres |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                              |                                                                                         |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                              |                                                                                         |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                              |                                                                                         |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                              |                                                                                         |  |  |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                              |                                                                                         |  |  |  |  |  |  |  |  |  |

| Convenient time to call you is:                                                                        |                       |
|--------------------------------------------------------------------------------------------------------|-----------------------|
| Alternative phone numbers are:                                                                         |                       |
| When do you want your accounts completed by?                                                           |                       |
| Would you like us to supply a copy to your bank?                                                       | Yes 🔄 No 📃 (Tick One) |
| If your accounts are to be supplied to your bank, please advise the name of your current bank manager: |                       |





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| Records Required:                                                                                    |                                     | ✓      | Comment:                               |          |
|------------------------------------------------------------------------------------------------------|-------------------------------------|--------|----------------------------------------|----------|
| Employer – Wages paid to Employed                                                                    | es                                  |        |                                        |          |
| Supply a month-by-month summary of gr<br>payments and PAYE deductions as retur<br>use Xero Payroll). |                                     |        |                                        |          |
| Covid-19 Wage Subsidy and o                                                                          | ther Covid-19 support pay           | mer    | nts                                    |          |
| Have you received the Wage Subsidy or                                                                |                                     |        |                                        |          |
| Date rec: _/_/_ \$                                                                                   | Date rec: _/_/_                     |        |                                        |          |
| Date rec: _/_/_ \$                                                                                   | Date rec: _/_/                      |        |                                        |          |
| Date rec: _/_/_ \$                                                                                   | Date rec: / /                       |        |                                        |          |
|                                                                                                      |                                     |        |                                        |          |
| Where Wage Subsidy payments have beer<br>of the business please provide details of th                |                                     | lers/p | artners/trustees/beneficiaries/owners) |          |
| Amounts received for each stake                                                                      | older                               |        |                                        |          |
| Whether amounts received were f                                                                      | or full-time or part-times          |        |                                        |          |
| lave you received the Covid-19 Leave S                                                               | support Payments? (please note all  | date   | s and receipts)                        |          |
| Date rec:// \$                                                                                       | Date rec://_                        | _\$    |                                        |          |
| Date rec:// \$                                                                                       | Date rec://                         | _\$_   |                                        |          |
| Date rec:/\$                                                                                         | Date rec: _/_/_                     | _\$    |                                        |          |
| Where Covid-19 Leave Support Payments<br>shareholders/partners/trustees/beneficiarie                 |                                     | vide   | details of the following:              |          |
| Amounts received for each stake                                                                      |                                     |        |                                        |          |
| Whether amounts received were f Have you received Covid-19 Short-Term                                | -                                   | all da | tes and receipts)                      |          |
| Date rec:// \$                                                                                       |                                     |        |                                        |          |
| Date rec:// \$                                                                                       |                                     |        |                                        |          |
| Date rec:// \$                                                                                       |                                     |        |                                        |          |
| Where Covid-19 Short-Term Absence Pay<br>shareholders/partners/trustees/beneficiari                  |                                     |        |                                        |          |
| Amounts received for each stake                                                                      | older                               |        |                                        |          |
| Whether amounts received were f                                                                      | or full-time or part-times          |        |                                        |          |
| Have you received Resurgence Support                                                                 | Payments? (please note all dates a  | and re | eceipts)                               |          |
| Date rec:// \$                                                                                       |                                     |        |                                        |          |
| Date rec:// \$                                                                                       |                                     |        |                                        |          |
| Date rec:// \$                                                                                       |                                     |        |                                        |          |
| Have you received a Covid-19 Cultural S                                                              | Sector Emergency Relief Grant or of | ther ( | ovid-19 support navments?              |          |
| Please provide details if it is an "other" Covid-19                                                  |                                     |        | sovid-19 support payments:             |          |
| Date rec: _/_/ \$                                                                                    | support payment                     |        |                                        |          |
| Date rec:// \$                                                                                       |                                     |        |                                        |          |
| σατο τουφ                                                                                            |                                     |        |                                        |          |
| Have you received the Covid-19 Small B                                                               | usiness Loan?                       |        |                                        |          |
| Date rec: _/_/_ \$                                                                                   |                                     |        |                                        |          |
|                                                                                                      |                                     |        | 022 076 7577                           | <u> </u> |
| iite 3, Level 2, Bonnington House                                                                    | Level 3, Craigs Investment B        | uildin | g 🛛 🔄 cristina@apexaccou               | nting    |
| 25 High Street, Christchurch 8011                                                                    | Mountain Club, 36 Grant Roa         |        |                                        | nung.u   |

Five Mile Center, Queenstown 9300

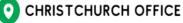
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| Have any amounts of Covid-19 support payments been repaid back?                                                          |                  |   |                               |   |
|--------------------------------------------------------------------------------------------------------------------------|------------------|---|-------------------------------|---|
| Please provide details of payment and reason for repayment                                                               |                  |   |                               |   |
| Date paid back:// \$                                                                                                     | Reason:          |   |                               |   |
|                                                                                                                          |                  |   |                               |   |
|                                                                                                                          |                  |   |                               |   |
|                                                                                                                          |                  |   |                               |   |
|                                                                                                                          |                  |   |                               |   |
| Fringe Benefit Tax (FBT) Returns                                                                                         |                  |   |                               | _ |
| Supply copies of Fringe Benefit Tax (FBT) returns and work p                                                             | apers.           |   |                               |   |
| Final Bank Statement                                                                                                     |                  | _ |                               |   |
|                                                                                                                          |                  |   |                               |   |
| Final bank statement for the year for all bank accounts                                                                  |                  |   |                               |   |
| Loan Statements                                                                                                          |                  |   |                               |   |
| Supply a copy of any loan transaction statements for the finar                                                           | ncial year up to |   |                               |   |
| your balance date, including loans that have been refinanced during the year.                                            | or repaid        |   |                               |   |
| Interest and Dividend Certificates                                                                                       |                  |   |                               |   |
| Supply copies of certificates.                                                                                           |                  | _ |                               |   |
| Lease details                                                                                                            |                  |   |                               |   |
|                                                                                                                          |                  |   |                               |   |
| Supply copies of lease agreements for non-building assets (e vehicles, equipment).                                       | .g. motor        |   |                               |   |
| Foreign Income                                                                                                           |                  |   |                               |   |
| Details of any foreign income received, and any tax deducted                                                             | from this.       |   |                               |   |
| Accounts Receivable (Debtors) - see attached Sched                                                                       | ule 1            |   |                               |   |
| All accounts or amounts owing to you at balance date should                                                              | be scheduled.    | _ |                               |   |
| Exclude bad debts. To enable bad debts to be excluded from                                                               |                  |   | Total at Balance Date:<br>    |   |
| must be written off prior to balance date.                                                                               |                  |   | \$<br>GST Included C Excluded |   |
|                                                                                                                          |                  |   |                               |   |
| Accounts Payable (Creditors) – see attached Schedu                                                                       | le 2             |   |                               |   |
| All accounts or amounts owing by you at balance date should indication across of an alternative and what the debt is for | be scheduled     |   | Total at Balance Date:<br>♠   |   |
| indicating name of creditor, amount and what the debt is for.                                                            |                  |   | \$<br>GST Included C Excluded |   |
|                                                                                                                          |                  |   |                               |   |
| Cash on Hand                                                                                                             |                  |   |                               |   |
| *Cash on Hand \$ Date ban                                                                                                | ked//            |   |                               |   |
| Petty Cash s                                                                                                             |                  |   |                               |   |
| Till Floats/Cash Floats \$                                                                                               |                  | _ |                               |   |
| *Incl cash sales prior to balance date but not banked until after                                                        | er balance date  |   |                               |   |





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| Stock on Hand                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| Stock<br>Stock should be physically counted at balance date and adequate records<br>retained to substantiate the dollar value arrived at.<br>Please note that if you estimate your stock to be less than \$10,000 at the<br>end of your income year, you may have the option of not physically counting<br>your stock. In these circumstances we will assume that your closing stock is<br>the same as your opening stock. Please indicate if you would like to use this<br>option. | Valued at lower of:<br>• cost<br>• net realisable value<br>• market value<br>\$<br>GST Included Excluded |
| Work in Progress<br>Include material costs, labour costs and overhead costs.<br>Briefly, how was this calculated?                                                                                                                                                                                                                                                                                                                                                                   | \$<br>GST Included Excluded                                                                              |
| <b>Prepayments Made</b><br>Balance of any payments made before balance date for goods or services<br>not received or used by balance date.                                                                                                                                                                                                                                                                                                                                          | \$<br>GST Included Excluded                                                                              |
| Income in Advance<br>Balance of any receipts received before balance date for goods or services<br>not provided by balance date.                                                                                                                                                                                                                                                                                                                                                    | \$<br>GST Included Excluded                                                                              |
| Capital Expenditure                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                          |
| Attach details of assets purchased or sold during the year such as motor vehicles, plant and equipment and properties. Where applicable please provide the following details:                                                                                                                                                                                                                                                                                                       |                                                                                                          |
| <ul> <li>Hire purchase or loan agreements</li> <li>Lease agreements</li> <li>All legal statements and agreements</li> <li>Trade-in details</li> <li>Lost, stolen or scrapped items</li> <li>Insurance pay out</li> <li>Copy of Tax Invoices</li> </ul>                                                                                                                                                                                                                              |                                                                                                          |
| A copy of last year's Asset and Depreciation Schedule is attached for your<br>information. We suggest you review the schedule and indicate any assets<br>that no longer exist.                                                                                                                                                                                                                                                                                                      |                                                                                                          |
| Transactions Not Through the Business                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                          |
| Were all sales banked into your business trading bank account? Yes No No If No, list amounts not banked and when they were lodged:                                                                                                                                                                                                                                                                                                                                                  | Personal \$<br>Business \$<br>Other \$                                                                   |

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| Other Non-Taxable Income                                                                                                                                                                                                                                   |                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| Did you receive non-taxable income from any other sources?<br>If Yes, please provide details.                                                                                                                                                              |                               |
| Legal and Loan Documents                                                                                                                                                                                                                                   |                               |
| Please attach any solicitor's statements and Sale and Purchase Agreements relating to any legal transactions during the year. Please also include Statements and Agreements relating to any mortgages, hire purchase, leases or loans.                     |                               |
| Business Expenses                                                                                                                                                                                                                                          | •                             |
| There are a number of invoices that we specifically require. Please ensure the records you provide us with include all paid accounts for:                                                                                                                  |                               |
| <ul><li>Insurance premiums</li><li>Legal fees</li></ul>                                                                                                                                                                                                    |                               |
| Private Use                                                                                                                                                                                                                                                |                               |
| Value of goods taken for private use at their <b>cost</b> price.                                                                                                                                                                                           | \$<br>GST Included C Excluded |
| Expenses paid in Cash or from Personal Funds                                                                                                                                                                                                               |                               |
| Please provide a list if applicable.                                                                                                                                                                                                                       |                               |
| Residential Land Withholding Tax                                                                                                                                                                                                                           |                               |
| Have you sold residential property in New Zealand where Residential Land<br>Withholding Tax has been deducted and paid to the IRD? If so, provide details<br>e.g. IR1100 Residential land withholding tax return and other sale and<br>purchase documents. |                               |
| Residential Property Sales                                                                                                                                                                                                                                 |                               |
| Have you sold any residential property during the year (not otherwise detailed on the information provided)?                                                                                                                                               |                               |
| If yes, when was the property purchased?                                                                                                                                                                                                                   |                               |
| If it was purchased with 10 years of the sale date,                                                                                                                                                                                                        | \$                            |
| what was the original purchase price                                                                                                                                                                                                                       |                               |
| • and the sale price?                                                                                                                                                                                                                                      |                               |

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|                                                                                                                                                                                                                                                                |      | ACCOUNTANCY<br>TAXATION & ADVIS       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------------------------------------|
| Mortgage Interest Paid on Residential Properties                                                                                                                                                                                                               |      | · · · · · · · · · · · · · · · · · · · |
| Have you incurred interest on residential properties owned (which is not your main family home or a 'new build*')? Is the interest also against properties other than residential rentals? If so, please provide details of amount of interest and dates paid. |      |                                       |
| * A new build is a self-contained residence that receives a Code Compliance<br>Certificate confirming the residence was added to the land on or after 27 March<br>2020                                                                                         |      |                                       |
| Research and Development                                                                                                                                                                                                                                       |      |                                       |
| Have you spent an amount on research and development during the income year? If so, provide ledger accounts and details of expenditure                                                                                                                         |      |                                       |
| Motor Vehicles                                                                                                                                                                                                                                                 | 1    | ·                                     |
| The proportion of motor vehicle business use as established by your vehicle log                                                                                                                                                                                | book | (s) is/are:                           |
| Vehicle Description:                                                                                                                                                                                                                                           |      |                                       |
| Business km                                                                                                                                                                                                                                                    |      |                                       |
| Total km                                                                                                                                                                                                                                                       |      |                                       |
| Percentage Business %                                                                                                                                                                                                                                          |      |                                       |
| Vehicle Description:                                                                                                                                                                                                                                           |      |                                       |
| Business km                                                                                                                                                                                                                                                    |      |                                       |
| Total km                                                                                                                                                                                                                                                       |      |                                       |
| Percentage Business %                                                                                                                                                                                                                                          |      |                                       |
| Please note that a detailed and accurate log book must be completed for a three expense claims will be limited to a maximum of 25% of expenses incurred. If yo which vehicles you are currently paying Fringe Benefit tax for:                                 |      |                                       |
|                                                                                                                                                                                                                                                                |      |                                       |





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 cristina@apexaccounting.co.nz
 www.apexaccounting.co.nz



| Home Office Expenses                                                                                                                                                                                     |                                                                                                                   |        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--------|
| If part of your home is set aside principally for use as an office/ $\!\!\!\!\wedge$                                                                                                                     | workshop/storage area, please provide the following details:                                                      |        |
| Address for Home Office                                                                                                                                                                                  |                                                                                                                   |        |
|                                                                                                                                                                                                          |                                                                                                                   |        |
| Home Office area: - no change as per previous year 🔲                                                                                                                                                     |                                                                                                                   |        |
| OR                                                                                                                                                                                                       |                                                                                                                   |        |
| Area used for Business:m²                                                                                                                                                                                |                                                                                                                   |        |
| Total Area of House & Workshop: m <sup>2</sup>                                                                                                                                                           |                                                                                                                   |        |
|                                                                                                                                                                                                          |                                                                                                                   |        |
| Actual Cost Method                                                                                                                                                                                       | OR IRD Square Metre Rate Method (see below note)*                                                                 |        |
| Power \$                                                                                                                                                                                                 |                                                                                                                   |        |
| Insurance (Building & Contents) \$                                                                                                                                                                       |                                                                                                                   |        |
| Interest (House Mortgage) \$                                                                                                                                                                             | Interest (House Mortgage) \$                                                                                      |        |
| Rates (including regional council rates) \$                                                                                                                                                              | Rates (including regional council rates) \$                                                                       |        |
| Rent \$                                                                                                                                                                                                  | Rent \$                                                                                                           |        |
| Repairs & Maintenance \$                                                                                                                                                                                 | *Would you like to use the IRD rate? Currently it is \$47.8                                                       | 85 per |
| Telephone rental \$                                                                                                                                                                                      | square metre. This allowance doesn't cover Mortgage<br>Interest, Rates or Rent costs so we would still require th | 0050   |
| Other \$                                                                                                                                                                                                 | amounts.                                                                                                          | 1030   |
| Total \$0.00                                                                                                                                                                                             |                                                                                                                   |        |
| Mixed Use Holiday Home                                                                                                                                                                                   |                                                                                                                   |        |
| Does this entity have a property (such as a holiday home or a b                                                                                                                                          | ach) that is used privately and also to                                                                           |        |
| derive income?                                                                                                                                                                                           | Yes No                                                                                                            |        |
| Details of property                                                                                                                                                                                      |                                                                                                                   |        |
|                                                                                                                                                                                                          |                                                                                                                   |        |
| Was the property empty for 62 days or more in the income year                                                                                                                                            | ? Yes No                                                                                                          |        |
| If yes, please complete the following section so we can determ                                                                                                                                           | ine the amount of allowable deductions.                                                                           |        |
| Mixed Use Holiday Home – Information Required                                                                                                                                                            |                                                                                                                   |        |
| The number of days the property was empty during the income                                                                                                                                              | year                                                                                                              |        |
| The number of days the asset was used by family or associated<br>OR where income from any person received was less than 80%<br>* Associated persons include close relatives, or if owned by an entity, p | of market rate                                                                                                    |        |
| If there is more than one tenant who used the property through                                                                                                                                           | the year, please attach details.                                                                                  |        |
| Name of tenant:                                                                                                                                                                                          |                                                                                                                   |        |
| Relationship to owner (if any):                                                                                                                                                                          |                                                                                                                   |        |
| Amount of rent they paid: \$                                                                                                                                                                             |                                                                                                                   |        |
| Dates rented (From: To)                                                                                                                                                                                  |                                                                                                                   |        |

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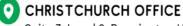
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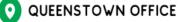
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|                                                                                                                                                                                                                                                                                              | TAXATION & ADVISORY                                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| Expenses incurred in respect of the property (the list below is not exhaustive – details of all expenses                                                                                                                                                                                     | ises will be                                                                                                                  |
| required):<br>Cost of advertising for tenants \$\$                                                                                                                                                                                                                                           |                                                                                                                               |
|                                                                                                                                                                                                                                                                                              |                                                                                                                               |
| Number of days spent in the property while repairing damages caused by tenants                                                                                                                                                                                                               |                                                                                                                               |
| Mortgage interest \$                                                                                                                                                                                                                                                                         |                                                                                                                               |
| Rates \$\$                                                                                                                                                                                                                                                                                   |                                                                                                                               |
| Insurance \$                                                                                                                                                                                                                                                                                 |                                                                                                                               |
| Repairs/maintenance for general wear and tear \$\$                                                                                                                                                                                                                                           |                                                                                                                               |
| Other (please give details)                                                                                                                                                                                                                                                                  |                                                                                                                               |
|                                                                                                                                                                                                                                                                                              |                                                                                                                               |
| Mixed Use Boat or Plane                                                                                                                                                                                                                                                                      |                                                                                                                               |
| derive income?         If Yes, provide details:         Description:         Market value:         \$                                                                                                                                                                                        | Yes No Yes No Yes No To Yes No To Yes Yes No To Yes Yes No To Yes No To Yes Yes No To Yes |
| Mixed Use Boat or Plane – Information Required                                                                                                                                                                                                                                               |                                                                                                                               |
| The number of days the asset was <b>unused</b> during the income year                                                                                                                                                                                                                        |                                                                                                                               |
| The number of days the asset was used by family or associated persons* during the income year<br>OR where income from any person received was less than 80% of market rate<br>* Associated persons include close relatives, or if owned by an entity, persons associated with the entity own |                                                                                                                               |
| For non-associated persons where payment received is at least 80% of market value:                                                                                                                                                                                                           |                                                                                                                               |
| Number of days the asset was used:                                                                                                                                                                                                                                                           |                                                                                                                               |
| Income received: \$                                                                                                                                                                                                                                                                          |                                                                                                                               |
| Expenses incurred in respect of the property (the list below is not exhaustive – details of all expe<br>required):                                                                                                                                                                           |                                                                                                                               |
|                                                                                                                                                                                                                                                                                              | nses will be                                                                                                                  |
| Cost of advertising for hireage \$                                                                                                                                                                                                                                                           | nses will be                                                                                                                  |
| Cost of advertising for hireage \$                                                                                                                                                                                                                                                           | nses will be                                                                                                                  |







|                                                                                                                                                |      |   | APEX |
|------------------------------------------------------------------------------------------------------------------------------------------------|------|---|------|
| Operating costs / supplies                                                                                                                     | \$   | . |      |
| Insurance                                                                                                                                      | \$   |   |      |
| Repairs/maintenance for general wear and tear                                                                                                  | \$   |   |      |
| Other (please give details)                                                                                                                    |      |   |      |
|                                                                                                                                                |      |   |      |
|                                                                                                                                                |      |   |      |
| Cryptoassets                                                                                                                                   | 1    |   |      |
| Have you received or traded in cryptoassets during the income year? If so, please provide the following information:                           |      |   |      |
| The type of cryptoasset                                                                                                                        |      |   |      |
| <ul> <li>For each transaction provide the date, type of transaction i.e. received<br/>or disposed of, number of units, value in NZD</li> </ul> |      |   |      |
| <ul> <li>Total units of each cryptoasset held at the beginning and end of the<br/>year</li> </ul>                                              |      |   |      |
| Exchange records and bank statements                                                                                                           |      |   |      |
| Wallet addresses                                                                                                                               |      |   |      |
|                                                                                                                                                | <br> |   |      |

#### Thank you for completing this questionnaire Don't forget to sign it



PO BOX 22656, CBD, Christchurch 8140







# Schedule 1 – Accounts Receivable (Debtors) Amounts owing to you at

**Client Name** 

| Name of Debtor | Description of Sale | Code | Total Incl GST |
|----------------|---------------------|------|----------------|
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Totals

\$ 0.00

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### CHRISTCHURCH OFFICE

Suite 3, Level 2, Bonnington House 225 High Street, Christchurch 8011 PO BOX 22656, CBD, Christchurch 8140



Level 3, Craigs Investment Building Mountain Club, 36 Grant Road Five Mile Center, Queenstown 9300



# Schedule 2 – Accounts Payable (Creditors) Amounts owing by you at

**Client Name** 

| Name of Creditor | Description of Goods | Code | Total Incl GST |
|------------------|----------------------|------|----------------|
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Totals

\$ 0.00



## CHRISTCHURCH OFFICE

Suite 3, Level 2, Bonnington House 225 High Street, Christchurch 8011 PO BOX 22656, CBD, Christchurch 8140



QUEENSTOWN OFFICE

Level 3, Craigs Investment Building Mountain Club, 36 Grant Road Five Mile Center, Queenstown 9300



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022 076 7577

www.apexaccounting.co.nz