

# **Annual Questionnaire**

NAME:		
BALANCE DATE: (please circle one)	31 MARCH 2024 30 JUNE 2024	31 MAY 2024 30 SEPTEMBER 2024
E-MAIL:		
TELEPHONE NO: HOME:	WORK:	

## 1. Records Required

## If **not using** computer software:

• All paid invoices/receipts (preferably filed in alphabetical or payment order.) ©

### If **using** computer software:

- USB back up (cashbook) OR print out of Summary Report, Trial Balance, General Ledger/Details Report, Transaction Report/Audit Trail OR hard copy of Accountants Reports per software recommendations.
- All paid invoices (preferably filed in alphabetical or payment order). ©
- If using MYOB/Xero please ensure expenses have documents attached if possible.

## Further records required: (regardless of whether using computer software or not)

- Bank Statements All business accounts (including savings, term deposits)
- Mortgage/Loan Statements
- All stock income and dairy statements
- Day books and petty cash books
- GST Returns (work-papers and copy of returns)

2.	2. Accounts Payable/Creditors (Money owed by you at balance date)				
	\$GS	T incl Yes/No			
	Supply statements/invoices.				

3. Accounts Receivable/Debtors (	Money owed to you at ba	alance date)		
	\$	GST Incl Yes/No		
Supply a list of Debtors and amoun	nts owed from your sales do	ockets and invoice books.		
4. Stock on Hand at Balance Dat				
- Raw Materials	\$			
- Retail Stocks	\$	GST Incl/Excl		
- Consumable Aids	\$	. GST Incl/Excl		
Basis of Valuation:	Retail Value/Cost	Value		
5. Work in Progress at balance d	ate			
ě		\$ GST		
Incl/Excl				
6. Cash on Hand \$	C			
(incl cash floats, Eftpos/Visa/Amex and	l cash sales prior to balance	date but not banked until after		
balance date)				
7. Do deposits/banking include of the bank statement)	ther than Sales/Debtors	? (if so please indicate clearly on		
e.g. Tax Refunds	Sale of Assets	Rent		
Loan Monies	Commission	Interest		
Dividends	Other			
8a. Were any Personal Drawings	s taken out of Sales and	not banked?		
Yes / No				
	Amount: \$			
8b. Were all takings banked into	your business bank acc	count?		
Yes / No				
If not, enter amounts n	ot banked but applied:			
- For personal expendit	- For personal expenditure: \$			
- For business expendit	cure (list expenses)	\$		
-	accounts (give details)			
<u> </u>				

Yes/No

**Cash Transactions** 

- Payments out of Personal Cash

- Payments out of Personal Bank Account

9.

10. Business Use	of Motor	Vehicles	
- Log Book	Kept?	Yes / No	If Yes please supply book,
- Usual Sup	pliers of Fu	uel, etc	
- Percentage	e Split betw	veen Car, Ute, etc	
11. Major Repairs	(eg. Buildin	ngs, plant, property dev	velopment, vehicles)
Details			
Date Work Done			
Major Suppliers			
12. Rent Received			perty Location and Rent Received.
		- Where are the	Expenses Paid From?
12 11 000 5	9.6		
office area. Please si			ear? If new, details of total area and
			ess account these should be clearly
identified)			
Rates	\$		
Insurances	\$		
Interest on Mortgage	\$		
Telephone	\$		
Power and Heating	\$		
Other	\$		
(Documents should be	available if	required)	
Total Area of Home/	Workshop		
Total Area of Office			
Total Area of Works	hop		

14. Capital Expenditure during Year:						
Additions Asset Description	on:	Cost \$				
Trade-In?	Yes/No	Details of trade in:				
HP Agreement?	Yes/No	Please attach if yes				
If land or building	ng purchased	please attach Lawyer Settlement Statement				
Additions Asset Description	on:	Cost \$				
Trade-In?	Yes/No	Details of trade in:				
HP Agreement?	Yes/No	Please attach if yes				
If land or building	ng purchased	please attach Lawyer Settlement Statement				
<u>Sales</u> <u>Asset</u>		Sale Price/Traded Where Banked				
15. Goods or M \$	aterials take					
16. If Capital A	asset Constru	acted with own Employees' Labour:				
- Cost of Labo						
- Cost of Mate	erials					

**17. Receipts for Charitable Donations** (Over \$5.00). Must now be claimed directly by yourself on a separate donation claim form (IR526)

- Attach Receipts if you would like us to complete this for you.

18. Family Support? (Working For Families / in work Children's Names, Dates of Birtl		Yes / No	
No. of Children still at School			
19. Any Overseas Income? Please supply details.		Yes / No	
20. Were you absent from New	Zealand during any	part of the year or unemployed?	•
Details of Period you did not wo	rk.		
21. Income from Partnership T	Frust/Estate	Yes / No	
22. Change of Address (NB. Contractor or Shareholder)	ompany Clients please	advise change of address of any	

# ADDITIONAL SERVICES

GST Returns

Wages & PAYE

Monthly Management Reporting

### TERMS OF ENGAGEMENT

**Howlett Dalzell Accountancy Services Ltd** will compile your financial statements, in accordance with the standards applicable from information provided by you. We will not audit, review or otherwise attempt to verify the accuracy or completeness of that information. Our services cannot be relied upon to detect fraud in your organisation.

#### Our obligations are to:

- 1. Accurately compile the financial information with due professional care.
- 2. Process the information in an effective and efficient manner.
- 3. Respect confidentiality of the information acquired in the course of our work.
- 4. Provide assistance in meeting tax obligations, including advice on payments and/or reminder letters re taxes due.

## It is understood and agreed that:

- 1. You will provide us with accurate and complete information necessary to compile such statements and you will accept responsibility for any failure to supply us with all relevant records and information. This includes information supplied to us for the preparation of Goods and Services Tax Returns.
- 2. The responsibility for the accuracy and completeness of assertions in the financial statements remains with you.
- 3. The responsibility for paying the correct tax on time rests with the taxpayer and not **Howlett Dalzell Accountancy Services Ltd** as agents.

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SIGNED:	<b>DATE:</b>
SIGNED:	DATE:

X Thank you for taking the time to fill in this questionnaire

