

Financial Statements Questionnaire – 2019

Ensure this questionnaire is completed and included with your records

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

Terms of Engagement

To: Oldershaw & Co Ltd

I/We hereby instruct you to prepare my/our Financial Statements and Taxation Returns for the 2019 tax year. 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.

You are hereby authorised to communicate with my/our bankers, solicitors, finance companies and all government agencies to obtain such information as you require in order to complete the above assignments. I/we authorise you to obtain information from Inland Revenue about all tax types except child support (NCP or CPR) in order to complete the above assignments. This includes obtaining information through all Inland Revenue media and communication channels.

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 | Signature | Date |
|------|-----------|------|
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- *The authority to act must be signed by all appropriate signatories i.e. all partners in a partnership, trustees in a trust and directors in a company (except where recorded that one director has specific signing authority or one person has recorded delegated authority from the other owners/members to sign on their behalf). Trustees who are acting as a Trustee in their professional capacity are not required to sign an authority to act, unless all trustees in the Trust are professional trustees, in which case at least one Trustee should sign. See **IRD Information Authority** for full details of this requirement.*

| | |
|--|---|
| 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 <input type="checkbox"/> No <input type="checkbox"/> (Tick One) |
| If your accounts are to be supplied to your bank, please advise the name of your current bank manager: | |
| <p>Has the nature of your business changed in any way during the past 12 months? If yes, please provide brief details:</p> <hr/> <hr/> <hr/> <hr/> <hr/> | |

| Records Required | ✓ | Comment |
|--|--|---|
| Bank Statements, Cheque butts, Cashbooks, etc | | |
| Where no Cashbook is supplied, please provide and include one month past balance date: <ul style="list-style-type: none"> ▪ Bank statements including any savings account or term deposit ▪ Cheque & Deposit butts showing the nature of each payment/deposit ▪ Receipt books. Make sure any items not for business sales are clearly marked ▪ Suppliers' invoices filed in cheque number order, include Dairy Company, Kiwifruit or Horticulture agents, Farmlands, Stock and Station Agents | <input type="checkbox"/> | |
| Where you supply a written Cashbook , please provide and include one month past balance date: <ul style="list-style-type: none"> ▪ Cashbook, written up, analysed and reconciled to the bank statements monthly ▪ Bank statements including any savings account or term deposit ▪ Cheque & Deposit butts showing the nature of each payment/deposit ▪ Statements from Dairy Company, Kiwifruit or Horticulture agents, Farmlands, Stock and Station Agents | <input type="checkbox"/> | |
| Where you supply a computerised Cashbook , please provide: <ul style="list-style-type: none"> ▪ Backup disk as at the end of financial year or email files to us ▪ Copy of Bank Reconciliation as at balance date for all bank accounts ▪ Final Bank Statement for year for all bank accounts ▪ Transaction Listing for Accounts Payable and Accounts Receivable as at balance date ▪ Statements from Dairy Company, Kiwifruit or Horticulture agents, Farmlands, Stock and Station Agents, including one month past balance date | <input type="checkbox"/> | |
| Loan Statements | | |
| Supply a copy of any loan transaction statements for the financial year up to your balance date. | <input type="checkbox"/> | |
| Employer – Wages paid to Employees | | |
| Please send a month-by-month summary of gross wages and PAYE deductions as returned to the IRD. OR Send a copy of your Employer Monthly Deduction Schedules (IR 348). Supply details of any allowance made for employees boarding / renting a house on the property. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | |
| Fringe Benefit Tax (FBT) Returns | | |
| Supply copies of Fringe Benefit Tax (FBT) returns and work papers. | <input type="checkbox"/> | |
| Goods & Services Tax (GST) Returns | | |
| Please supply your copies of Goods & Services Tax (GST) returns and work papers. | <input type="checkbox"/> | |
| Interest and Dividend Certificates | | |
| Supply copies of certificates. | <input type="checkbox"/> | |
| Accounts Receivable (Debtors) – see attached Schedule 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 income, these must be written off prior to balance date. Note: Include any dairy statements, which are receivables in the month following balance date. | <input type="checkbox"/> | Total at Balance Date: \$ _____ GST Included <input type="checkbox"/> Excluded <input type="checkbox"/> |
| Accounts Payable (Creditors) – see attached Schedule 2 | | |
| All accounts or amounts owing by you at balance date should be scheduled indicating name of creditor, amount and what the debt is for. Alternatively, mark on cheque butts or highlight in cash book those items in the month following your balance date, which should be included. Holiday pay or bonuses paid within 63 days of your balance date may be included. | <input type="checkbox"/> | Total at Balance Date: \$ _____ GST Included <input type="checkbox"/> Excluded <input type="checkbox"/> |
| Cash Income Not Banked During Year | | |
| Proceeds received but not paid into your bank account or stock firm. | <input type="checkbox"/> | _____ \$ _____ _____ \$ _____ |

| Records Required | ✓ | Comment |
|---|--|--|
| Capital Expenditure | | |
| <p>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:</p> <ul style="list-style-type: none"> ▪ Hire purchase or loan agreements ▪ Lease agreements ▪ All legal statements and agreements ▪ Trade-in details ▪ Lost, stolen or scrapped items ▪ Copy of Tax Invoices <p>A copy of last year's Asset and Depreciation Schedule is attached for your information. We suggest you review the schedule and indicate any assets that no longer exist.</p> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | |
| Development Expenditure | | |
| <p>Development expenditure includes clearing land, drainage, construction of roads, irrigation, supporting frames for crops, construction of fences (where there are no existing fences), etc. It can also include costs such as fertiliser or regrassing if you are undertaking a major conversion project.</p> <p>Please provide full details if you have undertaken any work of this type.</p> | <input type="checkbox"/> | |
| Legal and Loan Documents | | |
| <p>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. Please include a copy of your latest Rateable Valuation for any properties you own.</p> | <input type="checkbox"/> | |
| Business Expenses | | |
| <p>There are a number of invoices that we specifically require. Please ensure the records you provide us with include all paid accounts for:</p> <ul style="list-style-type: none"> ▪ Insurance premiums ▪ Legal fees ▪ ACC payments and arrangements | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | |
| Livestock on Hand – see attached, Client Questionnaire Livestock Sheet | | |
| <p>A schedule has been enclosed. Please complete and attach.</p> <p>If applicable a copy of last year's Livestock Schedule is enclosed for your information.</p> | <input type="checkbox"/> | |
| Consumables on Hand | | |
| <p>If the value of total unused consumables on hand at balance date exceeds \$58,000, please provide full details. This threshold is for the combined value, not the individual values. Examples include fencing materials, ear tags, dips, drenches, animal health remedies, fertiliser, purchased supplementary feed, petrol, diesel, oil, twine, alkathene pipe etc. Please note, that this does not include home grown hay/silage and only includes purchased feed costs.</p> <p>Please estimate the cost (Excluding GST) of consumables on hand</p> <p>Petrol, Diesel & Oil</p> <p>Fencing Materials</p> <p>Water Piping & other items held for water system repairs</p> <p>Dairy Shed Supplies (Cleaning Products, Teat Spray etc)</p> <p>Shearing Shed Supplies</p> <p>Animal Health Products (e.g. drench, dip, mastitis treatment products)</p> <p>Other farm stores</p> <p>Fertiliser</p> | <input type="checkbox"/> | <p style="text-align: center;">\$</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> |

| Purchased Stock Feed (at cost): Hay Silage Maize Silage Grain Palm Kernel Other Total Cost | | _____ _____ _____ _____ _____ _____ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--|------|-------|----|--------|-------|--|-----|-------|-------------------|--------|-------|-------------------|-------|-------|--------|-------|-------|----|----------|-------|--|--|--|--|-------|-------|--|-------|-------|--|-------|-------|--|-------|-------|--|--------------------|--|--|--|--|
| Unsold Produce | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please provide full details of any produce on hand at balance date that is intended for sale. Examples include honey, wool, timber, hay, silage, crops. | <input type="checkbox"/> | Estimated Value (Excl GST) _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;">Category</th> <th style="text-align: left; width: 30%;">Quantity</th> <th style="width: 40%;"></th> </tr> </thead> <tbody> <tr> <td>Wool</td> <td>_____</td> <td>kg</td> </tr> <tr> <td>Timber</td> <td>_____</td> <td></td> </tr> <tr> <td>Hay</td> <td>_____</td> <td>Tonnes dry matter</td> </tr> <tr> <td>Silage</td> <td>_____</td> <td>Tonnes dry matter</td> </tr> <tr> <td>Grain</td> <td>_____</td> <td>Tonnes</td> </tr> <tr> <td>Honey</td> <td>_____</td> <td>kg</td> </tr> <tr> <td>Firewood</td> <td>_____</td> <td></td> </tr> <tr> <td>Other Produce, Harvested Crops & Fruit</td> <td></td> <td></td> </tr> <tr> <td>_____</td> <td>_____</td> <td></td> </tr> <tr> <td>_____</td> <td>_____</td> <td></td> </tr> <tr> <td>_____</td> <td>_____</td> <td></td> </tr> <tr> <td>_____</td> <td>_____</td> <td></td> </tr> <tr> <td>Total Value</td> <td></td> <td></td> </tr> </tbody> </table> | Category | Quantity | | Wool | _____ | kg | Timber | _____ | | Hay | _____ | Tonnes dry matter | Silage | _____ | Tonnes dry matter | Grain | _____ | Tonnes | Honey | _____ | kg | Firewood | _____ | | Other Produce, Harvested Crops & Fruit | | | _____ | _____ | | _____ | _____ | | _____ | _____ | | _____ | _____ | | Total Value | | | | |
| Category | Quantity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wool | _____ | kg | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Timber | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Hay | _____ | Tonnes dry matter | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Silage | _____ | Tonnes dry matter | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Grain | _____ | Tonnes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Honey | _____ | kg | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Firewood | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other Produce, Harvested Crops & Fruit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| _____ | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| _____ | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Value | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Private Use | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Value of goods taken for private use at their cost price (excluding livestock). Goods taken for own use | Quantity Sheep _____ Cattle _____ Pigs _____ Milk _____ Other _____ | <input type="checkbox"/> \$ _____ <input type="checkbox"/> GST Included <input type="checkbox"/> Excluded <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Expenses paid in Cash or from Personal Funds | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please provide a list if applicable. How many meals have you provided to contractors? (morning / afternoon tea = 1/2) | <input type="checkbox"/> <input type="checkbox"/> | Quantity _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Motor Vehicles

The proportion of motor vehicle business use as established by your vehicle log book(s) is/are:

Vehicle Description _____ **Vehicle Description** _____

Business _____ km Business _____ km

Total _____ km Total _____ km

Percentage Business _____% Percentage Business _____%

- Please note that a detailed and accurate log book must be completed for a three month period every three years or vehicle expense claims will be limited to a maximum of 25% of expenses incurred.
- If you are operating as a Company, please indicate which vehicles you are currently paying Fringe Benefit tax for:

Mixed Use Holiday Home

Does this entity have a property (such as a holiday home or a bach) that is used privately and also to derive income?

Yes No

If yes, provide details of property: _____

Was the property empty for 62 days in the income year?

Yes No

If yes, please complete the following section so we can determine 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 persons* during the income year _____

OR where income from any person received was less than 80% of market rate _____

* Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property

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) _____

Expenses incurred in respect of the property (the list below is not exhaustive – details of all expenses will be required):

Cost of advertising for tenants \$ _____

Cost of repairing damages caused by 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

Does this entity have a boat or plane (with a market value of \$50,000 or greater), that is used privately and also to derive income? Yes No

If Yes, provide details:

Description: _____

Market value: \$ _____

Was the asset unused for 62 days in the income year? Yes No

If yes, please complete the following section so we can determine the amount of allowable deductions.

Mixed Use Boat or Plane – Information Required

The number of days the asset was **unused** during the income year _____

The number of days the asset was used by family or associated persons* during the income year _____

OR where income from any person received was less than 80% of market rate _____

* Associated persons include close relatives, or if owned by an entity, persons associated with the entity owning the property

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 expenses will be required):

Cost of advertising for hireage \$ _____

Cost of repairing damages caused by hireage \$ _____

Operating costs / supplies \$ _____

Insurance \$ _____

Repairs/maintenance for general wear and tear \$ _____

Other (please give details) _____

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

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

| | |
|--------------------|--|
| Client Name | |
|--------------------|--|

| Name of Debtor | Description of Sale | Code | Total Incl GST |
|-----------------------|----------------------------|-------------|-----------------------|
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| Totals | |
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Schedule 2 – Accounts Payable (Creditors)

Amounts owing by you at Balance Date

| | |
|-------------|--|
| Client Name | |
|-------------|--|

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