

# Client Deduction Sheet



*Friendly service from  
Professionals who care*

<b>MOTOR VEHICLE:</b> Did you use your car for work (other than driving to & from work)		Yes / No	
If yes, describe how you used it for work.			
REGO:	Make:	Model:	Motor size in cc's
Total work kilometers travelled		Did you keep a log book of travel?	
Describe how kilometres calculated		Yes / No	
<b>TRAVEL:</b> Were you required to be absent from your normal home overnight for work?			Yes / No
Destination / Reason for travel		Were you re-imbursed?	Yes / No
Costs not re-imbursed - (include Accomodation, meals and fares)			
<b>UNIFORM:</b> Are you required to wear a uniform to work that is logoed AND compulsory			Yes / No
Describe uniform			
List description and cost of logoed purchases.			
Are you required to wear protective clothing e.g. safety boots, aprons, safety vests etc?			Yes / No
List description and cost of protective items.			
Do you launder clothing	Yes / No	Washes per week?	washed separately? Yes / No
<b>SELF-EDUCATION:</b> Did you incur education costs directly related to your employment?			Yes / No
Education Institution:		Course name	
Expenses incurred:			
<b>OTHER DEDUCTIONS:</b> Did you incur any other expenses, which were not re-imbursed?			Yes / No
e.g. diary, union fees, sun protection, replacement tools, telephone, stationery etc. Please list below:			
<b>EDUCATION CHILDREN:</b> (Includes computers, and related equipment, software, internet, text books, stationery or tools.			
<b>DONATIONS:</b> Did you make donations (excludes tickets) to charities / political parties?			Yes / No
List charities / amount donated			
<b>TAX AGENT FEES:</b> Who did your tax last year?		What was the fee?	\$
<b>PRIVATE HOSPITAL INSURANCE:</b> Do you have private hospital insurance?			Yes / No
Fund name:		Member number	
Type/level of cover	Ancillary OR Hospital OR Combined		Excess
Full year	Yes / No	If not covered for full year, list dates covered ...../...../..... To ...../...../.....	
Please attach the rebate letter received from your health fund to this deduction sheet			
<b>ZONE OFFSET:</b> List any remote localities visited for work or leisure.			
<b>DECLARATION:</b> I certify that I have incurred the costs detailed above and can supply documentation supporting each claim made.			
Signature _____			