

Name: _____

TFN: _____ ABN: _____

Street Address: _____

Phone (Home): _____ Mobile: _____

Date of Birth: _____ Email: _____

Spouse Name: _____ Occupation: _____

Bank Account: _____ BSB: _____ A/C: _____

Work Related Expenses	Per Annum	Notes
D1. Vehicle Use	km	
D2. Travel Expenses	\$	
D3. Laundry	\$	
Protective Clothing	\$	
Safety Gear	\$	
D4. Self-Education	\$	
Text Books	\$	
Course	\$	
Course	\$	
Conference	\$	
D5. Other Work Related	\$	
Mobile p/m	\$	
Internet p/m	\$	
Stationery	\$	
Subscriptions	\$	
D6. Equipment	\$	
D9. Donations	\$	
D10. Accounting Costs	\$	

Please note: the ATO may require to sight evidence of the expenditure.
 Proof is either Invoice, EFT POS receipt or Bank/bankcard statement clearly evidencing expenditure.

All expenses are subject to final approval and acceptance by the ATO

 Rental Property Dividends

 Bank Interest Private Health Ins

 HECS Debt
Notes