

**Name:**

## **2024 BLOODSTOCK CHECKLIST**

**RECORDS REQUIRED**

(Tick One)✓  
Enclosed      Not  
                                 Applicable

- |                                                                                                                                      |                          |                          |
|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| 1. Bank Statements – Working Account<br>– Other Business Accounts<br>(including accounts now closed)                                 | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Cashbook or Computer Printouts (reconciled to your<br>bank statements if possible)                                                | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Petty Cash Book and/or Day Book                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Vehicle Log Book(s) (if applicable)                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Stock Sheets                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Copies of the monthly Employer deduction forms<br>and the Employer monthly schedule (if available)                                | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Resident Withholding Tax on interest reconciliation<br>Statement (IR 15S).                                                        | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. G.S.T Returns together with copies of all calculations.                                                                           | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Fringe Benefit Tax Returns<br>(Please include copies of all calculations)                                                         | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Hire Purchase and Lease Agreements<br>- New Agreements commencing this year.                                                     | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Other Legal Contracts<br>- Mortgages, Loans, Advances<br>- Solicitors Settlement Statements<br>- Guarantees, Loan Securities etc | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Tax deduction certificates for business investment<br>income, i.e interest and dividends.                                        | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Monthly Barter Card Statements (if applicable)                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |

**INFORMATION REQUIRED**

1. Cash on Hand at Balance Date (including Petty cash, till floats and unbanked takings **BUT NOT** bank balances). \$ \_\_\_\_\_

2. Stock, Work in Progress at Balance Date.  
Stock to be valued at lower of cost or market value.

Stock (excluding G.S.T): \$ \_\_\_\_\_  
Work in Progress (excluding G.S.T): \$ \_\_\_\_\_

Please note that it is a requirement of Inland Revenue that stock sheets be prepared. Please provide these to this office.

3. G.S.T Payable/Receivable as at Balance Date (if known) \$ \_\_\_\_\_

- |                                                                                                                                                                                                                                                          | (Tick One) ✓             |                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------|
|                                                                                                                                                                                                                                                          | <u>Enclosed</u>          | <u>Not<br/>Applicable</u> |
| 4. Debtors – Amounts owed to you at Balance Date<br>Please complete the schedule on page 3.                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>  |
| 5. Creditors – Amounts owed by you at Balance Date<br>Please complete the schedule on page 4.                                                                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/>  |
| 6. Asset Sales and Purchases.<br>Please complete the schedule on page 6                                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/>  |
| 7. Private Use. Please complete the schedule on page 7.                                                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/>  |
| 8. Are all business expenses paid by cheque from your business account? If not, please supply details of these other expenses on page 5.                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/>  |
| 9. Is all business income deposited to your business account?<br>If not, please supply details of these other transactions on page 5.                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/>  |
| 10. Are any deposits not sales? If so, please supply details of those deposits on page 5, or clearly identify on bank statements.                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/>  |
| 11. If you are registered for G.S.T and any of your suppliers of goods and services are not registered for G.S.T, please supply the name of those unregistered suppliers and note on cheque butt or in cashbook that the payment does not include G.S.T: |                          |                           |

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you supply computer printouts please ensure that GST has not been deducted from non GST payments.

**INFORMATION REQUIRED**

- 1. Cash on Hand at Balance Date (include Petty cash, till floats and unbanked takings **BUT NOT** bank balances). \$ \_\_\_\_\_
- 2. Stock, Work in Progress at Balance Date.  
Stock to be valued at lower of cost or market value.  
  
 Stock (excluding G.S.T): \$ \_\_\_\_\_  
 Work in Progress (excluding G.S.T): \$ \_\_\_\_\_

Please note that it is a requirement of Inland Revenue that stock sheets be prepared. Please provide these to this office.

- 3. G.S.T Payable/Receivable as at Balance Date (if known) \$ \_\_\_\_\_

- |                                                                                                                                                                                                                                                                       | (Tick One) ✓             |                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|
|                                                                                                                                                                                                                                                                       | <u>Enclosed</u>          | <u>Not</u><br><u>Applicable</u> |
| 12. Debtors – Amounts owed to you at Balance Date<br>Please complete the schedule on page 3.                                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/>        |
| 13. Creditors – Amounts owed by you at Balance Date<br>Please complete the schedule on page 4.                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/>        |
| 14. Asset Sales and Purchases.<br>Please complete the schedule on page 6.                                                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>        |
| 15. Private Use. Please complete the schedule on page 7.                                                                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/>        |
| 16. Are all business expenses paid by cheque from your business account? If not, please supply details of these other expenses on page 5.                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/>        |
| 17. Is all business income deposited to your business account?<br>If not, please supply details of these other transactions on page 5.                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/>        |
| 18. Are any deposits not sales? If so, please supply details of those deposits on page 5, or clearly identify on bank statements.                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/>        |
| 19. If you are registered for G.S.T and any of your suppliers of goods and services are not registered for G.S.T, please supply the name of those unregistered suppliers and note on cheque butt or in cashbook that the payment does not include G.S.T:<br><br>_____ |                          |                                 |
|                                                                                                                                                                                                                                                                       |                          |                                 |
|                                                                                                                                                                                                                                                                       |                          |                                 |

If you supply computer printouts please ensure that GST has not been deducted from non GST payments.







<u>MOTOR VEHICLES</u>						
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
<u>OTHER e.g land, buildings furniture etc</u>						
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

---

---

**BUSINESS ASSETS SOLD OR TRADED-IN BY YOU DURING YEAR** (Including land and buildings)

---

---

DATE	ASSET	SALE PRICE/ TRADE (Incl. G.S.T)	G.S.T RETURNED YES/NO
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**GOVERNMENT SUBSIDY**

Date Claimed: \_\_\_\_\_ Date Claimed: \_\_\_\_\_ Date Claimed: \_\_\_\_\_

Amount: \_\_\_\_\_ Amount: \_\_\_\_\_ Amount: \_\_\_\_\_

**PRIVATE USE**

Portion of Expenses incurred to be allocated as private

(a) Vehicle Expenses

(i) Where Log Book used	or	(ii) Where no Log Book used
Business KM		Business Portion _____%
Total KM		(maximum 25%)
_____		

(b) Telephone & Tolls (private portion) \_\_\_\_\_% or \$ \_\_\_\_\_

(c) Goods taken for own use \$ \_\_\_\_\_

(d) Cash taken from Business for Private Use \$ \_\_\_\_\_  
(Not shown elsewhere as Drawings)

**USE OF HOME**

If you use your home in the course of your business, you may be entitled to claim for your office, workshop or storage expenses.

**HOME OFFICE**

Please advise:

1. (a) Floor Area of House: \_\_\_\_\_ square feet/metres  
Floor Area for business use: \_\_\_\_\_ square feet/metres

OR

(b) Business use area as percentage of Total Floor Area: \_\_\_\_\_%

2. Power	\$ _____
Rent	\$ _____
Repairs and Maintenance to Business Area	\$ _____
Insurance – House	\$ _____
Insurance – Contents	\$ _____
Mortgage Interest (excluding principal payments)	\$ _____
Rates	\$ _____
Telephone	\$ _____
Others	\$ _____

**TERMS OF ENGAGEMENT**

I authorise you to prepare financial statements from the information and records I have supplied to you and to act as my agent for income tax purposes. I advise you not to complete an audit or review. I accept responsibility for the accuracy and completeness of all records and information supplied to you.

Signature: \_\_\_\_\_

Date: \_\_\_/\_\_\_/2024

Please also sign the "Authorisation to Collect Information" on page 11.





Foals Born During Year

<u>Name</u>	<u>Mare</u>	<u>Date Born</u>	<u>Filly/Colt</u> <u>Enter "F"</u> <u>or "C"</u>	<u>Service Fee</u> <u>\$ (incl. G.S.T)</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Horses Purchased

<u>Name</u>	<u>Date</u>	<u>Cost (incl. G.S.T)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Horses Sold

<u>Name</u>	<u>Date</u>	<u>Cost (incl. G.S.T)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Stock Deaths

<u>Name</u>	<u>Date</u>
_____	_____
_____	_____
_____	_____

**AUTHORISATION TO COLLECT INFORMATION – 2024 FINANCIAL YEAR**

From time to time it is more cost efficient for us to contact other parties to obtain information for and on your behalf, subject to the provisions of the Privacy Act 1993.

Examples are copies of bank statements, details of cheques presented, deposits made, copies of loan agreements and details of hire purchase agreements, settlement statements, interest and dividend advice notices etc. Costs may be charged direct to you by the agency concerned.

I authorise HSW Limited to request information, which is required for a timely and orderly completion of my financial statements, direct from the individual agents concerned.

I acknowledge that I am aware of the purpose for which this information is being collected and disseminated.

**Signature of Client:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Client Name:** \_\_\_\_\_

**HAVE YOU ALSO SIGNED THE DECLARATION ON PAGE 8?**