Investment Income Information



Individual Tax Return 20__ (Enter year)

Please e-mail, fax or post this form back to our office **PRIOR** to your appointment:

TO: Scotts Charte	red Accountants	FAX:	(03) 5222 1195
ATTENTION:		_ E-MAIL	: info@scottsca.com.au
CLIENT NAME:		CLIENT SIGNATURE: X	
CEIEITI ITAITE.		CEIENT SIGNATORE.	

DIVIDENDS							
Company Name	Date Paid	Unfranked	Franked	Imputation Credits	TFN Credits		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		
		\$	\$	\$	\$		

UNIT TRUSTS (Please bring or send to our office your Trust Tax Year Summary)						
Trust Name	Trust Income	TFN Credits	Imputation Credits	Capital Gains	Foreign Income	Foreign Tax
	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$

INVESTMENTS SOLD / DISPOSED						
Company/Trust Name	Date Sold	Number Sold	Amount Received	Date Purchased	Number Purchased	Amount Paid
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$