



## **Trust Supplement 2018**

## This supplement is for all trusts

Ensure this questionnaire is completed and included with your records				
Client Name:	Address:			
Balance Date:	Phone:			
	Email:			
To: McCoy & Co Limited	'			
Terms of Engagement				
I/We hereby instruct you to prepare my/our Financial State necessary to carry out such services, and will be responsil rely upon the information provided by me/us. Your service on the Financial Statements in so far as third parties are copreparation of the Financial Statements and Taxation Returbowever should anything come to light of this nature during	ble for the accuracy and comp es are not intended to, and acc oncerned, or in the fulfilling of urns you will not be specifically	oleteness of such information. I/We cordingly will not result in the expressions statutory audit requirements. I/	understand that you will ssion by you of an opinion We understand that during	
I/We understand that the Financial Statements and Taxatic should change in any material respect, I/we will inform you contents of the Financial Statements.		•		
All other terms and conditions of this engagement are the a client.	same as those referred to in	the original Engagement Letter I/we	e signed when I/we became	
I/We also accept that you have the right to charge interest payment by the 20th of the month following invoice date. you incur will be fully recoverable from me/us.				
You are hereby authorised to communicate with my/our basyou require in order to complete the above assignment		panies and all government agencie	es to obtain such information	
Accident Compensation Corporation				
I/We authorise your organisation to act as my/our agent for query and change information on my/our ACC Levy accouronganisation's main representative discretion to delegate members of your organisation will also be able to query an	unt(s) through ACC staff, and the access to my/our ACC information	nrough ACC Online Services. This a ation to other members of your orga	uthority will also allow your	
You are to represent me/us as my/our tax agent. All incomreturn on behalf of myself/ourselves or any of my/our associated as the complex of t		y me/us however you are authorised	d to sign any other taxation	
All other terms and conditions of this engagement are the	same as those referred to on	the McCoy & Co website www.mcc	coyandco.co.nz.	
Signature		Date		
Tax Refunds				
Please provide the bank account number that you would I	ike any tax refunds credited in	nto.		
Rank account	1			

All Oamaru clients please drop information into: c/- Hope & Associates Legal, 76 Thames Street, Oamaru Level 1, 149 Victoria St, PO Box 13-688, Christchurch 8141, Phone 03 366 1058, Email info@mccoyandco.co.nz

www.mccoyandco.co.nz





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Records Required	Comment
Capital Expenditure	
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:  • Hire purchase or loan agreements  • Lease agreements  • All legal statements and agreements  • Trade-in details  • Lost, stolen or scrapped items  • Copy of Tax Invoices  A copy of last year's Asset and Depreciation Schedule is available on request. We suggest you review the schedule and indicate any assets that no longer exist.	
Legal Documents	
Please attach any solicitor's statements. Please provide all any new Trust Deeds, minutes, resolutions, beneficiary distributions or other documents, that were not drafted by McCoy & Co Ltd.	
Gifting Programme	
Please advise the date of gifts made to your trust during the financial year. If you have copies of the gifting documentation from your solicitor, please attach this.	Date of Gift
Major Transactions	
Please attach a list of any major transactions that have occurred during the financial year that affect the Trust.	
Mixed Use Assets	
Do you own an assets, such as property, boat or plane that is used privately and also to derive income? If so please complete the Mixed Use Assets Supplement.	
Trust Works	
Trust Works is a new service we are offering to our clients, which sets out to resolve the major issues around compliance of family trusts, it's also makes trusts easy to manage and delivering secure storage for all your important information for the life of your trust. If you would like more information please tick this box.	

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

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 No (Tick One)
If your accounts are to be supplied to your bank, please advise the name of your current bank manager:	

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