

SMSF CLIENT CHECKLIST

Client Name:

Balance Date:

BANK ACCOUNTS

Please provide copies of bank statements from 1 July 2015 to 30 June 2016 for the following bank accounts and any new cash investments for the current year:

Yes	N/A
<input type="checkbox"/>	<input type="checkbox"/>

INVESTMENTS

Please provide copies of purchase and sale contracts for all investments traded throughout the year.

<input type="checkbox"/>	<input type="checkbox"/>
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Please provide copies of all income statements relating to funds investments including: dividend statements, distribution statements, other one off receipts such as capital returns and any other relevant correspondence relating to the funds investments.

<input type="checkbox"/>	<input type="checkbox"/>
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Please provide a list of investments detailing the purchase date and cost and the number of units held in each parcel of shares.

<input type="checkbox"/>	<input type="checkbox"/>
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REAL PROPERTY

Please provide copies of rental statements for properties managed by an agent.

<input type="checkbox"/>	<input type="checkbox"/>
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Please provide a copy of rent expense account for properties rented to a related entity.

<input type="checkbox"/>	<input type="checkbox"/>
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Please provide a copy of the lease agreement for properties rented to a related entity.

<input type="checkbox"/>	<input type="checkbox"/>
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Please provide a copy the documentation related to the valuation of real property.

<input type="checkbox"/>	<input type="checkbox"/>
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Please provide copies of any invoices relating to major expenses such as body corporate or repairs and maintenance.

<input type="checkbox"/>	<input type="checkbox"/>
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CONTRIBUTIONS

Please provide a copy of employer superannuation account to confirm payments of employer contributions to the fund.

<input type="checkbox"/>	<input type="checkbox"/>
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Please provide a list of all member contributions paid into the fund including the payment of superannuation fund expenses from private bank accounts.

<input type="checkbox"/>	<input type="checkbox"/>
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Please provide any ETP Rollover statements.

<input type="checkbox"/>	<input type="checkbox"/>
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OTHER

Please provide a copy of insurance policy renewal documents.

<input type="checkbox"/>	<input type="checkbox"/>
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Please provide the PAYG instalments paid each quarter.

<input type="checkbox"/>	<input type="checkbox"/>
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Other information specific to the fund (please use other side if needed):

<input type="checkbox"/>	<input type="checkbox"/>
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