## **Motor Vehicle Information**

Year Ended 30<sup>th</sup> June, 20\_\_\_ (Enter year)

**CLIENT NAME:** 



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

TO:	Hyde Cooper Wells Accountants	FAX:	(03) 5995 3477
ATTENTION:		E-MAIL:	info@hcwa.com.au

INFORMATION FOR TAX RETURN				
Log Book Kept:	□ Yes □ No			
Period Covered:				
Registration No:				
Vehicle Make & Model:				
Owner of Vehicle:				
Driver of Vehicle:				
Total Km Travelled in Financial Year:				
Business Km in Log Book Period:				
Total Km in Log Book Period:				
Your Calculation of Business Use %:				
Date Purchased://	Purchase Price: \$			
☐ Leased ☐	☐ Hire Purchase ☐ Paid Cash			

**CLIENT SIGNATURE:** 

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RUNNING COSTS	TOTAL FOR YEAR (including GST)	MONTHLY PAYMENTS
Fuel:	\$	Please e-mail, fax or post to our office a
Registration:	\$	copy of your Hire Purchase / Lease
Insurance:	\$	Agreement (if you haven't already).
Repairs & Maintenance:	\$	
Lease Payments:	\$	\$
HP Payments:	\$	\$
Interest Paid:	\$	
Membership Fees:	\$	
Parking:	\$	
Tolls:	Ś	