Motor Vehicle Information

Year Ended 30th June, 20__ (Enter year)

CLIENT NAME:



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

TO:	Optimal Accounting Solutions	POST:	PO Box 2252, Bundoora, VIC, 3083
ATTENTION:		E-MAIL:	admin@optimalas.com.au

CLIENT SIGNATURE:

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INFORMATION FOR TAX RETURN ☐ Yes **Log Book Kept:** □ 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

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:	\$	