



Sole Trader Checklist

Flourishing Figures
 incorporating
Mick Mahoney & Associates
 ABN: 38 618 104 840

1300 865 624 | info@ff.tax
flourishingfigures.com.au

Full Name: _____

Business Name: _____

ABN: _____ GST Registered? Y/N _____

Industry: _____

All figures should be excluding GST

Sales Income \$ _____

Other Income \$ _____ Description _____

Other Income \$ _____ Description _____

Interest Received \$ _____

Assets sold? If yes, copy of invoice

(Live)Stock on Hand at July 1 \$ _____

(Live)Stock Purchases \$ _____

(Live)Stock on Hand at June 30 \$ _____

Accountant \$ _____

Advertising \$ _____

Bank Fees \$ _____

Bookkeeping \$ _____

Cleaning & Laundry \$ _____

Computer Expenses \$ _____

Donations \$ _____

Hire Equipment \$ _____

Insurance \$ _____

Interest Paid \$ _____

Internet \$ _____

Electricity & Gas \$ _____

Merchant Fees \$ _____

Materials & Supplies \$ _____

Office Expenses \$ _____

Protective Clothing \$ _____

Rent \$ _____

Rates \$ _____

Repairs \$ _____

Rubbish Removal \$ _____





Sole Trader Checklist

Flourishing Figures
 incorporating
 Mick Mahoney & Associates
 ABN: 38 618 104 840

1300 865 624 | info@ff.tax
flourishingfigures.com.au

Subscriptions & Memberships \$ _____

Telephone/ Mobile \$ _____ Business Use% _____

Training \$ _____

Tools & Equipment* \$ _____

*If an item is over \$300, please give us a copy of the invoice

Travel Expenses \$ _____

Website \$ _____

Other Expenses \$ _____ Description _____

Other Expenses \$ _____ Description _____

Other Expenses \$ _____ Description _____

Motor Vehicle

Logbook % _____

Make/ Model/ Rego _____

Copy of Purchase Invoice _____

Copy of Finance Documents (if applicable)

Fuel \$ _____

Services/ Tyres/ Repairs \$ _____

Insurance \$ _____

Rego \$ _____

Lease \$ _____

Toll \$ _____

Car Wash \$ _____

Other \$ _____

Or kms Travelled (max 5,000 kms) _____

Sub- contractors \$ _____ Does your industry require you to complete a Taxable Payments Annual Report (TPAR)? If yes, we need to see a copy or provide details for us to complete

Wages \$ _____ Have you logged these through STP? Y / N

Superannuation \$ _____

Work Cover Insurance \$ _____ plus copy of Rebateable Rumuneration

If you have livestock, we need to know the type (ie. Cattle) and # head: _____

Sold _____ Purchased _____ Births _____ Deaths _____ # Head @ July 1 _____ # Head @ June 30 _____

Average hours worked at home, per week: _____

