**Main Contact Details for the Group**

|  |  |
| --- | --- |
| Financial Year Ended 30 June …. |  |
| Main Entity/Person for Billing Purposes |  |
| Contact Person |  |
| Email Address |  |
| Phone Number |  |
| Postal Address |  |

**List All (If Any) Businesses/Entities in the Group**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Entity Legal Name** | **Company,**  **Trust, P’ship,**  **Sole Trader, or**  **Superfund**  **?** | **Financial Statements Required?**  **Default is Y**  **(Y/N)** | **Tax Return Required?**  **(Y/N)** | **Completed Mandatory Questionnaire?**  **(Y/N)** | **Separate Invoice Required? Default is N**  **(Y/N)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**List All Individuals in the Group (Including Any Business Sole Traders Above – Enter them in Both Sections)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Person’s Full Name** | **Date of Birth**  **(dd/mm/yy)** | **Tax Return**  **Required**  **?**  **(Y/N)** | **Completed Mandatory Questionnaire**  **?**  **(Y/N)** | **Separate Invoice Required? Default is N**  **(Y/N)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Enter Any Special Requests, Questions or Comments about the End of Year Requirements in the Box Below**

|  |
| --- |
|  |

***This Form is Continued on the Next Page…All Pages are Mandatory***

**Other Services**

We get a lot of feedback from our clients about what else we can do to help grow their business or save tax. Below you will find a list of our other services you may wish to consider. We will provide a fixed price quote for any services you indicate an interest in below. There is absolutely no obligation until you sign any subsequent proposal, so if you just want to see the prices simply indicate your interest below and we will let you know.

|  |  |  |
| --- | --- | --- |
| **Other Services Available to our Clients**  ***Indicate if you want to talk to us about any of these services*** | **Interested In Hearing More? Must Answer**  **(Y/N)** | **Any Requests, Questions or Comments?** |
| **Services for Businesses** |  |  |
| Business Financial Health Check (Prepare Reports and Provide Advice on Past Performance and Financial Trends and Ratios) |  |  |
| Comprehensive Strategic Planning Service (Marketing, Sales, Pricing, Product mix, Systems, Technology, Productivity etc) |  |  |
| Budgeting, Cashflow Forecasts and Financial Projections |  |  |
| Regular Financial Reporting (Monthly, Quarterly or Half-Yearly) |  |  |
| Business Valuation Report – Simple Or Comprehensive Assessment |  |  |
| Written Business Plan Document – Includes Advice and Report |  |  |
| Advice Regarding Succession Planning (Planning for Sale, Shareholder Agreements, Restructuring, Keyman Insurances) |  |  |
| Sell Your Business For You – We are a Licenced Business Agent |  |  |
| Create an Employee Incentive Plan (Bonus Scheme for Your Staff) |  |  |
| Comprehensive Review Of Your Internal Accounting Systems, Procedures and Software (with Report and Recommendations) |  |  |
| Team Alignment Session – Prepare and Conduct a Planning Day for You and Your Staff to Share and Align Goals and Conduct Training |  |  |
| Advice on Buying a Business (Including Pros/Cons, Valuation, Structuring, Funding, Negotiating the Price and Terms) |  |  |
| Advice on Your Current Business Structure – Review Opportunities for Tax Minimisation, Asset Protection, Self-Managed Superfund) |  |  |
| Preparing a Comprehensive Package of Reports to Support an Application for Finance or Funding |  |  |
| **Services for Individuals** |  |  |
| Review of Your Personal Insurances (Income Protection, Life, Trauma, Disability, Keyman etc) |  |  |
| Free Review of Your Personal Financial Situation (Investments, Superannuation, Budgeting, Retirement Planning etc) |  |  |
| Wills and Estate Planning Documents and Advice |  |  |
| Personal and Business Loans – New Loans and Refinancing |  |  |

**Declaration**

In signing this declaration you understand that you must also return a completed questionnaire for each entity and individual listed on this form before Climax Business Strategies can prepare a fixed price proposal to undertake any agreed work. You understand that you are under no obligation at all until you receive, sign and return the subsequent fixed price proposal. All lines of the services section must have either “Y” or “N” indicated.

|  |  |  |
| --- | --- | --- |
| **Name of Authorised Person** |  | |
| **Signature** |  | *🡨 (If returning in word format type “Authorised”)* |
| **Date** |  | |