

Financial Planning, Accounting and Tax Return Preparation Application Form

Provides each registered beneficiary with financial assistance for their financial planning, accounting and tax return preparation services, home ownership planning, estate planning and will drafting.

BENEFICIARY INFORMATION

Application Date:	Date of Birth:	
Full Name:	Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior	
Street Address:		
City / Suburb:	State:	Postcode:
Email:	Phone:	
<input type="checkbox"/> Please tick if the phone number provided is a new number and you would like us to update your contact details		

DETAILS OF SERVICE PROVIDED

Financial Planning: \$ Provider:
Telephone:

Accounting / Tax Preparation: \$ Provider:
Telephone:

Other \$ Provider:
Telephone:

REIMBURSEMENT OR PAYMENT DIRECT TO SUPPLIER

Funds requested: \$ *Maximum assistance is \$3,500 per financial year (limit of \$1,000 per financial year for tax return preparation & accounting service)*

Have you already paid the bill? Yes No

If 'yes' please provide:

1. A receipt showing that the account has been paid, and
2. Bank statement / remittance showing the funds were paid from your bank account.

If 'no' please provide:

1. A quote or invoice from the supplier showing the services and the amount owed.
2. Bank / BPay details of the supplier – details should be included on the supplier's invoice/quote.

Applications will NOT be processed until supporting documentation and supplier payment details are received.

I am not claiming benefits from another source for this expense (e.g. Plan B / AET, Gumala, IBN).

I understand that my application will be processed by the Trustee (Mutual Trust) within **FIVE (5) business days once all required supporting documentation has been received.**

Beneficiary Signature: **Date:** / /

NOTE: Please keep a record of your receipts as you may be asked to account for how these funds were spent as per the Yinhawangka Charitable Trust Deed.

Please send completed forms and supporting documents to Mutual Trust by:

Fax: (08) 9230 7701 **Email:** perthadmin@mutualtrust.com.au

Mail: Mutual Trust, PO Box 307, CLAREMONT WA 6910

If you have any queries, please contact us on (08) 9230 7700
