

16.	Gifts or donations \$2 and over including receipts for same - to public institutions and school building funds - provide name of institution or school and amount gifted or donated - to registered political parties - provide details of all donations and subscriptions made	<input type="checkbox"/>
17.	Interest and dividend deductions - details of interest and other charges paid on loans relating to interest and dividend-bearing investments	<input type="checkbox"/>
18.	Zone rebate - record of time spent during financial year in remote locations	<input type="checkbox"/>
19.	Non-employer sponsored/personal superannuation contributions - full details should be provided including the name of the fund, your member account number, and the amount contributed - you may be entitled to a tax rebate for superannuation contributions for your non-working or low income earning spouse - did you make superannuation contributions on behalf of your spouse?	<input type="checkbox"/>
20.	Family Tax Benefit (FTB) - did you have care of a dependent child during in 2011 - did you or your spouse receive FTB through the Family Assistance Office in 2011?	<input type="checkbox"/> <input type="checkbox"/>
21.	Did you pay child support in 2011?	<input type="checkbox"/>
22.	Details of net family medical expenses incurred (if they exceed \$2,000 'out of pocket', that is net of Medicare & Private Health Fund rebates) - full details of expenditure on medical, dental and chemist (prescriptions only) etc. - full details of health insurance and Medicare refunds received Please provide Medicare Number and Reference Number details of family members; Medicare Number: _____ Number 1: _____ Number 2: _____ Number 3: _____ Number 4: _____ Number 5: _____ Number 6: _____ Number 7: _____ Number 8: _____	<input type="checkbox"/>
23.	Are you entitled to the Medicare levy exemption or reduction in 2011? Please provide exemption documentation.	<input type="checkbox"/>
24.	Private Health Insurance - Copy of private health insurance statement for related detailing insurance cover held by/covering you, your spouse and your dependent children. NOTE: Medicare Levy Surcharge (MLS) Individuals and couples are liable to the surcharge when their taxable income and reportable fringe benefits exceed \$77,000 and &154,000 respectively.	<input type="checkbox"/>

