



Return of Information for Tax Purposes

To be completed by the clergy person and confirmed as correct by 2 churchwardens. Please return a copy of the completed form to the Personnel Administrator (Adele Green) via fax (033-3422557 / 033-3456335) or email (adele@dionatal.org.za) by no later than 30 April 2015.

INCOME TAX YEAR 1 MARCH 2015 TO 29 FEBRUARY 2016

Name: _____

Parish: _____

Motor Vehicle

Notes:

- If you make use of the parish vehicle for parish and private travel (Complete parish vehicle details below).
- If you make use of the parish vehicle for parish travel and private vehicle for private travel (Complete parish vehicle and private vehicle details below).
- If you make use of your private vehicle for both parish and private use (Complete private vehicle details below).

	Parish Vehicle		Private Vehicle
Make		Make	
Model		Model	
Registration Number		Registration Number	
Date Purchased	/ /	Date Purchased	/ /
Date from which used	/ /	Date from which used	/ /
Purchase Price (incl. Vat)	: R		
Maintenance Plan (yes/no)			

Travel / Car Allowance

Date from which received	/ /	Petrol	: R	/ month
Basic amount received	: R	Insurance	: R	/ month
		Other: _____	: R	/ month

NB: A logbook must be kept to record both parish and private travel

2015 Easter Offering / Pentecost Offering

Notes:

- If you have not received your offering by the time you submit your form, please advise when you expect to receive it.
- Once you have received it, please inform the Personnel Administrator in writing.

Date received / /

Amount : R

Housing

Notes:

- If you live in a rectory or accommodation provided by the parish complete details below
- If you live in your own home complete details below

<u>Living in a Rectory / Accommodation provided by the Parish</u>		
<u>Amounts paid by the Parish for:</u>		
Insurance for personal contents	: R	/ annum
Private use of telephone	: R	/ month
<u>Any other costs paid by the Parish</u>		
- _____	: R	/ month
- _____	: R	/ month

<u>Living in your own Home</u>		
Housing Allowance received	: R	/ month
<u>Amounts paid by the Parish for:</u>		
Insurance for building & contents	: R	/ annum
Private use of telephone	: R	/ month
<u>Any other costs paid by the Parish</u>		
- _____	: R	/ month

Other Allowances Received

- Are you in receipt of any of the following:

	Amount	Date Received	Comments
Stipend Supplementation	: R / annum	/ /	
Medical Allowance	: R / annum	/ /	
Education / Bursary	: R / annum	/ /	
Book Allowance	: R / annum	/ /	
Vestments Allowance	: R / annum	/ /	
Holiday Allowance	: R / annum	/ /	
Other: _____	: R / annum	/ /	

Interest free/Low interest loan

Original loan amount	: R	Commencement Date	/ /
Repayment	: R / month	Interest rate charged	%
Balance Owing	: R		

NB: Please attach a copy of the latest loan account statement.

We confirm that the above information is correct

Churchwarden's name & signature

Churchwarden's name & signature

Clergy Person's signature

Date

Note:

Should any information change (i.e. change of allowances or move to a different parish) during the course of this tax year, please communicate these changes to the Personnel Administrator immediately.