



THE LAW SOCIETY
OF SOUTH AUSTRALIA
THE VOICE OF THE SOUTH AUSTRALIAN LEGAL PROFESSION

**Statement Regarding Receipt or Holding of Trust Money for Period
1 July 2018 to 30 June 2019**

Legal Practitioners Regulations 2014 - Regulation 48

Part A – Law Practice Declaration

Part B – Trust Money Statement

PART A

Insert name of law practice

Insert address of law practice

DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF:

1.	Did the law practice also provide legal services under other names? If "Yes" complete table below.	Yes	No
		<input type="checkbox"/>	<input type="checkbox"/>
	Law Practice Name	Period from	Period to

2.	Did the law practice conduct business at other offices? If "Yes" complete table below.	Yes	No
		<input type="checkbox"/>	<input type="checkbox"/>
	Law Practice Name and Address	Period from	Period to

3.	Was the law practice operated by: Complete the table below for the reporting period e.g. 1 July 2018 to 30 June 2019.			
			if YES indicate	Period from
	Sole Practitioner	<input type="checkbox"/>		
	A Multi-Practitioner Law Practice	<input type="checkbox"/>		
	Incorporated Legal Practice	<input type="checkbox"/>		
	Some other type of entity:	<input type="checkbox"/>		

4. During the period 1 July 2018 to 30 June 2019 did the law practice?

		YES	NO
(a)	Receive or hold trust money that was required to be deposited into a general trust account with an Approved ADI in this jurisdiction:	<input type="checkbox"/>	<input type="checkbox"/>
(b)	Receive or hold controlled money;	<input type="checkbox"/>	<input type="checkbox"/>
(c)	Receive or hold trust money subject to a specific power	<input type="checkbox"/>	<input type="checkbox"/>
(d)	Receive or hold trust money subject to a written direction	<input type="checkbox"/>	<input type="checkbox"/>
(e)	Receive or hold a direction to invest trust money on behalf of any person	<input type="checkbox"/>	<input type="checkbox"/>
(f)	Receive transit money and NOT retain particulars as required by Regulation 39 of the Legal Practitioners Regulations 2014	<input type="checkbox"/>	<input type="checkbox"/>
(g)	Have a general trust account but DID NOT receive or hold money that was required to be deposited into a general trust account with an Approved ADI account in this jurisdiction.	<input type="checkbox"/>	<input type="checkbox"/>
During the period 1 July 2018 to 30 June 2019 did a legal practitioner or associate provide legal services (other than in a personal/private capacity):			
(h)	as a sole executor?	<input type="checkbox"/>	<input type="checkbox"/>
(i)	as a sole attorney or under any other power in a sole capacity?	<input type="checkbox"/>	<input type="checkbox"/>
(j)	as a co-executor?	<input type="checkbox"/>	<input type="checkbox"/>
(k)	as a joint attorney or under any other power in a co-capacity?	<input type="checkbox"/>	<input type="checkbox"/>

5. If any question at Item 4(a), (b), (c), (d), (e) or (f) is answered YES the law practice is required to complete Part B and provide the completed Law Practice Declaration and Trust Money Statement to its External Examiner, no later than **31 August 2019**, prior to the commencement of the examination.
6. If all questions at Item 4 are answered NO, the law practice is required to provide Part A only to the Law Society of South Australia by **31 October 2019**.
7. If only question 4 (g) is answered YES, then the practice is required to provide the trust bank statements for the period together with Part A only to the Law Society of South Australia by **31 October 2019**.

Contact details of the Society.

By Mail: Law Society of South Australia
GPO Box 2066
ADELAIDE SA 5001

By Courier or Personal Delivery: Level 10, Terrace Towers
178 North Terrace
ADELAIDE SA 5000

By email: To be printed, signed, scanned and emailed to ethicsandpractice@lawsocietysa.asn.au

Declaration:

As the practitioner who completed Part A of the Statement Regarding Receipt or Holding of Trust Money, I declare that the responses contained in this Part of the Statement are true to the best of my knowledge and belief:

Signed: _____

Print Name: _____

Date: _____

PART B

Name of law practice:

1. TRUST ACCOUNT RECORDS

	YES	NO	N/A
Are separate trust account records maintained for any branch offices or law practice names noted in questions 1 and 2 of Part A of this form?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If "Yes" please provide a separate Part B with the name of each branch office or law practice name on the additional form.

2. GENERAL TRUST ACCOUNT DETAILS

General Trust Account Reconciliation	Bank 1	Bank 2 (if required)
ADI Name		
BSB and ADI Account Number		
Branch Address		
Period	From: To:	From: To:
Balance as per general trust ADI (bank) statement* as at 30 June 2019	\$	\$
Add: Receipts not yet deposited (if any)		
Deduct: Unpresented cheques (if any)		
Deduct: Deposits not yet received (if any)		
Add/Deduct: other adjustments		
Reconciled ADI (bank) Balance	\$	\$

Attach schedule if more than two bank accounts maintained.

*ADI Approved Deposit Taking Institution.

Cash book balance as at 30 June 2019	\$
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Trial Balance as at 30 June 2019	\$	No of Matters
Total of all trust ledger account balances as at 30 June 2019		
Less amount (if any) in Law Practice Combined Trust Account		
Total trust ledger balances		

	YES	NO
As at 30 June 2019 was there a difference between the reconciled ADI balance, cash book and list of trust ledger accounts and their balances?	<input type="checkbox"/>	<input type="checkbox"/>

If "Yes" please provide an explanation in a Schedule to this Declaration.

3. TRUST LEDGER ACCOUNT DEFICIENCY REPORT

	YES	NO
Did the law practice have any trust ledger accounts that were overdrawn or deficient during the period?	<input type="checkbox"/>	<input type="checkbox"/>

If "Yes" please provide a list of the accounts and explanations.

4. GENERAL TRUST ADI ACCOUNT OVERDRAWN REPORT

	YES	NO
Was any General Trust Account overdrawn or deficient during the period?	<input type="checkbox"/>	<input type="checkbox"/>

If "Yes" please provide a list of the date(s) and explanations.

5. INFORMATION ON DORMANT TRUST LEDGER BALANCES

	YES	NO
Does the law practice have any dormant trust ledger accounts disclosed on the trial balance as at 30 June 2019?	<input type="checkbox"/>	<input type="checkbox"/>

If "Yes" please provide a list of the dormant balances.

NB: Dormant balances are ledger accounts with no movement for 12 months or more.

6. INFORMATION RELATING TO THE MAINTENANCE OF THE RECORDS FOR THE GENERAL TRUST ACCOUNT

	YES	NO
Has the practice changed its general trust accounting system since 30 June 2018 ?	<input type="checkbox"/>	<input type="checkbox"/>
Has the person responsible for the maintenance of the general trust account records changed since 30 June 2018 ?	<input type="checkbox"/>	<input type="checkbox"/>

	Manually	Computer	Mixture of Manual/Computer
How are the general trust account records maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If by computer, state name of software and version number.			

7. REVNET ACCOUNT

	YES	NO
Do you operate a separate account for RevNet purposes (ie an account other than the General Trust Account or the office account from which all RevNet payments are made)?	<input type="checkbox"/>	<input type="checkbox"/>
If Yes , provide account details:		
Account Name:		
BSB: _____ Account Number: _____		
Have you obtained written approval from the Society to operate such an account?	<input type="checkbox"/>	<input type="checkbox"/>

8. LAW PRACTICE COMBINED TRUST ACCOUNT (CTA)

	YES	NO	
Do you have a Combined Trust Account?	<input type="checkbox"/>	<input type="checkbox"/>	
If your CTA deposit is not held at the same ADI as your general trust account, where is it held?			
Amount on deposit in CTA as at 30 June 2019:	\$		
a. For the CTA calculation period ending 30 November 2018	YES	NO	
Were you required to make a deposit to the Combined Trust Account?	<input type="checkbox"/>	<input type="checkbox"/>	
Did you make the required deposit within the time prescribed?	<input type="checkbox"/>	<input type="checkbox"/>	
If not, did you give notice of withholding to the Society on or before 14 December 2018?	<input type="checkbox"/>	<input type="checkbox"/>	
b. For the CTA calculation period ending 31 May 2019:	YES	NO	
Were you required to make a deposit to the Combined Trust Account?	<input type="checkbox"/>	<input type="checkbox"/>	
Did you make the required deposit within the time prescribed?	<input type="checkbox"/>	<input type="checkbox"/>	
If not, did you give notice of withholding to the Society on or before 14 June 2019?	<input type="checkbox"/>	<input type="checkbox"/>	
c. For the period 1 July 2018 to 30 June 2019:	YES	NO	
Have you made any withdrawals from the Combined Trust Account during this period?	<input type="checkbox"/>	<input type="checkbox"/>	
If YES, list the dates and amounts withdrawn:			
Date	Amount Withdrawn	Date	Amount Withdrawn

9. CONTROLLED MONEY DETAILS AS AT 30 JUNE 2019

	Amount \$	Number of Accounts
Controlled Money		

10. CONTROLLED MONEY ACCOUNT DEFICIENCY REPORT

	YES	NO	N/A
Was any controlled money account overdrawn during the period 1 July 2018 to 30 June 2019?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If "Yes" please provide a list of the accounts and any explanations.

11. INFORMATION RELATING TO THE MAINTENANCE OF THE RECORDS FOR THE CONTROLLED MONEY RECORDS

	YES	NO	N/A
Has the practice changed its Controlled Money accounting system since 30 June 2018 ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the person responsible for the maintenance of the controlled money records changed since 30 June 2018 ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Manually	Computer	Mixture of Manual/Computer
How are the controlled money account records maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If by computer, state name of software and version number.			

12. INFORMATION RELATING TO ACCOUNTS WHERE TRUST MONEY IS THE SUBJECT OF A SPECIFIC POWER AS AT 30 JUNE 2019

	Amount \$	Number of Accounts
Trust money subject to a specific power		

13. INFORMATION RELATING TO THE REGISTER OF INVESTMENTS OF TRUST MONEY AS AT 30 JUNE 2019

	Amount \$	Number of Accounts
Investment Register money		

14. INFORMATION RELATING TO THE MAINTENANCE OF THE RECORDS FOR THE REGISTER OF INVESTMENT OF TRUST MONEY RECORDS

	YES	NO	N/A
Has the practice changed its Register of Investment of Trust Money accounting system since 30 June 2018 ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the person responsible for the maintenance of the Register of Investment of Trust Money records changed since 30 June 2018 ?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Manually	Computer	Mixture of Manual/Computer
How are the Register of Investment of Trust Money records maintained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If by computer, state name of software and version number.			

15. INFORMATION RELATING TO TRANSIT MONEY AS AT 30 JUNE 2019

	Amount \$	Number of Accounts
Amount of any transit money held on 30 June 2019.		

16. SCHEDULES TO BE ATTACHED

	YES	NO	N/A
Explanation for Reconciliation difference is attached as per Item 2 as Schedule 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List of: Receipts not yet deposited; Unpresented cheques; Deposits not yet receipted; Other adjustments is attached as per Item 2 as Schedule 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A copy of the 30 June list of trust account ledgers and their balances is attached as per Item 2 as Schedule 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copy of the General Trust Account Reconciliation and Bank Statement as at 30 June is attached as Schedule 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copies of Overdrawn Trust Ledger Accounts and/or General Trust Account as per Item 3 and 4 are attached as Schedule 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List of Dormant trust ledger balances recording; name of trust ledger, amount, matter description, date of last transaction and reason balance held as per Item 5 is attached as Schedule 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explanation for non-compliance with CTA deposit as per Item 8 is attached as Schedule 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schedule of Controlled Money accounts as per Item 9 are attached as Schedule 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Copies of overdrawn Controlled Money accounts as per Item 10 are attached as Schedule 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List of Trust money subject to a specific power as per Item 12 is attached as Schedule 10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List of Register of Investment of Trust Money as per Item 13 is attached as Schedule 11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
List of Transit Money as per Item 15 is attached as Schedule 12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. DURING THE EXAMINATION PERIOD, DID THE LAW PRACTICE DISBURSE TRUST MONEY VIA ELECTRONIC FUNDS TRANSFER (EFT) FROM

	YES	NO	N/A
General Trust Accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controlled Money Accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trust Money Subject to a Specific Power	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written direction money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Register of Investments of Trust Money Accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. ASSESSING RISKS TO THE LAW PRACTICE

Affairs of the Practice - Pursuant to clause 3(1) of Schedule 4 of the *Legal Practitioners Act 1981*

OFFICE ACCOUNT/OPERATING ACCOUNT		
1. Bank balance as at 30 June 2019	\$	
2. Overdraft limit as at 30 June 2019	\$	
3. Provide a copy of the most recent Office Bank Reconciliation Report		
Please answer the following:		
	YES	NO
4. Are taxes and superannuation up to date? (if not provide details including amount(s) owing, relative periods due and any payment arrangement(s))	<input type="checkbox"/>	<input type="checkbox"/>
5. Have any solicitors letters, demands, summons, judgements or warrants been issued against you/practice/company during the period 1 July 2018 to 30 June 2019 (if so provide details of amounts owing and due dates)		
	<input type="checkbox"/>	<input type="checkbox"/>
6. Have any creditors placed you/practice/company on "cash on demand" terms? (if so provide details)		
	<input type="checkbox"/>	<input type="checkbox"/>
7. Have any operating account cheques been dishonoured during the period 1 July 2018 to 30 June 2019? (if so provide details)		
	<input type="checkbox"/>	<input type="checkbox"/>
8. Have you/practice/company been refused finance during the period 1 July 2018 to 30 June 2019? (if so provide details)		
	<input type="checkbox"/>	<input type="checkbox"/>
9. Have you changed banks for the office operating account during the period 1 July 2018 to 30 June 2019?		
	<input type="checkbox"/>	<input type="checkbox"/>

19. CERTIFICATION

Name of certifying principal: _____

I certify that to the best of my knowledge and belief:

(a) the details provided in Part B of the Statement are complete and correct; and

(b) the records in respect to:

	Have	Have not	N/A
General Trust Accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controlled Money Accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trust Money Subject to Specific Power	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written direction money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Register of Investments of Trust Money Accounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transit Money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

been properly kept in accordance with the provisions of the *Legal Practitioners Act 1981* and *Legal Practitioners Regulations 2014*; and

(c) all trust money received has been dealt with in accordance with the requirements of the *Legal Practitioners Act 1981* and *Legal Practitioners Regulations 2014*.

Signed: _____

Print Name: _____

Date: _____