

FORM - K
RETURN FOR PAYMENT OF TAX AT COMPOUNDED RATE
 (other than works contract)
 [See rules 3(2) and 19(8)]

To TIN

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The Assessing Authority,

Name of the business:

Address :

Turnover details-

Sl.No.	Description of the goods	Total turnover (in Rs.)	Exemption claimed (in Rs.)	Taxable turnover (in Rs.)	Rate of Tax	Tax Due (in Rs.)
Total						

- 1. Gross Tax due Rs.
- 2. Adjustments * Rs.
- 3. Tax due Rs.
- 4. Tax paid Rs.

5. Balance tax paid vide Receipt / Cheque /
 D.D No..... dated for Rs.

* State reasons for adjustments

DECLARATION

I / We.....S/odeclare that to the best of my / our knowledge and belief, the information furnished in the above statement is true and complete.

Place :
 Date :

Signature:
 Name and Designation
 / Status and Relationship
 to the dealer with seal: