

Form No. 27A

Form for furnishing information with the statement of deduction / collection of tax at source (tick whichever is applicable) filed on computer media for the period
(From ___/___/___ to ___/___/___ (dd/mm/yy)#

- | | |
|--|---|
| 1 (a) Tax Deduction Account No. <input style="width: 150px; height: 20px;" type="text"/> (b) Permanent Account No. <input style="width: 150px; height: 20px;" type="text"/> (c) Form No. | (d) Financial Year <input style="width: 150px; height: 20px;" type="text"/> (e) Assessment year <input style="width: 150px; height: 20px;" type="text"/> (f) Previous receipt number <input style="width: 150px; height: 20px;" type="text"/> <i>(In case return / statement has been filed earlier)</i> |
|--|---|

2 Particulars of the deductor / collector

| | |
|---------------------------------|--|
| (a) Name | |
| (b) Type of deductor* | |
| (c) Branch / division (if any) | |
| (d) Address | |
| Flat No. | |
| Name of the premises / building | |
| Road / street / lane | |
| Area / location | |
| Town / City / District | |
| State | |
| Pin code | |
| Telephone No. | |
| E-mail | |

3 Name of the person responsible for deduction / collection of tax

| | |
|---------------------------------|--|
| (a) Name | |
| (b) Address | |
| Flat No. | |
| Name of the premises / building | |
| Road / street / lane | |
| Area / location | |
| Town / City / District | |
| State | |
| Pin code | |
| Telephone No. | |
| E-mail | |

4 Control totals

| Sr. No. | No. of deductee / party records | Amount paid Rs. | Tax deducted / collection Rs. | Tax deposited (Total challan amount) Rs. |
|---------|---------------------------------|-----------------|-------------------------------|--|
| Total | | | | |

5 Total Number of Annexures enclosed

6 Other Information

VERIFICATION

I, _____, hereby certify that all the particulars furnished above are correct and complete.

Place : _____ Signature of person responsible for deducting / collecting tax at source _____

Date : _____ Name and designation of person responsible for deducting / collecting tax at source _____

* Mention type of deductor - Government or Others

dd/mm/yy :- date/month/year