

THE KERALA VALUE ADDED TAX RULES, 2005

FORM No. 10 F

RETURN

[for Government Departments/Local Bodies/
Autonomous Institutions]

(See Rule 24)

HELP LINE contact persons/Ph. Nos.

| | | | | | | | | |
|------|---|---|--|---|---|--|---|---|
| DATE | D | D | | M | M | | Y | Y |
|------|---|---|--|---|---|--|---|---|

TO

The Jurisdictional Tax Officer,

VAT OFFICE
ADDRESS

NAME OF STATE/CENTRAL/UNION
TERRITORY GOVT DEPTS OR LOCAL
BODIES/AUTONOMOUS INSTITUTIONS /
BOARDS / CORPORATIONS / STATUTORY
AUTHORITIES ETC

I / WEBEING DULY AUTHORISED OFFICER OF THE
DEPARTMENT / INSTITUTION MENTIONED ABOVE HEREBY DECLARE THE
PARTICULARS OF SALES / PURCHASES OF GOODS EFFECTED AS REQUIRED
UNDER THE PROVISIONS OF KERALA VALUE ADDED TAX ACT 7 RULES
THEREUNDER-

1. Return Period

FROM

2. Details of sales

| Nature of goods | Total sales | Taxable sales | Tax collected / Tax due |
|-----------------|-------------|---------------|-------------------------|
|-----------------|-------------|---------------|-------------------------|

3. Particulars of the buyer

ADDRESS TIN

4. Details of local purchases from registered dealers

| GOODS | PURCHASE VALUE | PARTICULARS OF THE SUPPLIER | TIN |
|-------|----------------|-----------------------------|-----|
|-------|----------------|-----------------------------|-----|

5.Details of interstate purchases

| GOODS | PARTICULARS OF THE SUPPLIER TIN | PURCHASE VALUE | WHETHER D FORM USED |
|-------|---------------------------------|----------------|---------------------|
|-------|---------------------------------|----------------|---------------------|

6.Details of works contracts executed

| DETAILS OF WORKS AWARDED | PARTICULARS OF CONTRACTOR & TIN | CONTRACT VALUE | DETAILS OF TDS |
|--------------------------|---------------------------------|----------------|----------------|
|--------------------------|---------------------------------|----------------|----------------|

7.Particulars of remittance

| VAT COLLECTED | TAX DEDUCTED AT SOURCE | VAT OTHERWISE DUE |
|---------------|------------------------|-------------------|
|---------------|------------------------|-------------------|

8.Reasons for non-remittance of tax , if any.

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I/Wehereby declare that the particulars furnished above are true to the best of my/our knowledge and belief.

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| SEAL |
|------|

Name,signature and status of Authorized Person