FORM - XXVII

Department of Commercial Taxes, Government of Uttar Pradesh [See rule-45(9) of the UPVAT Rules, 2008]

Annual Tax Deduction Statement																								
Assessment Year				Ending on d d n						m	m m y y y y													
Name and Address of																								
the person deducting																								
VAT																								
Phon	e No., if any																							
TIN	TDN														W	.ef.	d	d	m	m	У	У	У	У
	TDS deducted month wise																							
SL. Name of month Total amount			nt	Total amount deposited			d	Challan Name of				e of I	Bank	/tre	asur	y /								
No			deducted in month				in bank or treasury									ub-treasury								
1				ШОІ	1111								+											
2																								
3																								
n																								
5																								
6																								
7																								
8																								
9																								
10																								
11																								
12																								
m . 1	Total																							
	amount deposited	d in b	ank	k or																				
treas	ury [In words]																							
Statement of Form-XXV - received & used																								
Op	ening Balance	1	rece	eive	d			use	d			Ca	Cancel/ Lost /Destroyed Cl				Closing Balance							
						+																		
<u>DECLARATION</u>																								
I																								
Place Date	Place Signature of authorized person Name and designation of authorized person person																							

Name and designation of Drawing & Disbursement Officer

Seal

Annexure-A of form XXVII

[In case of work contract and right to use]

Sl.	Name and	TIN/TDN	Contract	Nature of	Gross	Amount	Date	No. of
No.	Address of		No. and	contract	Amount	deducted	of	TDS
	the person		date		paid	as VAT	Payment	Certificat
	from whom							e issued
	deducting							
	VAT							
1	2	3	4	5	6	7	8	
1								
-								

Place -	Signature, Name and
Date -	Designation of authorized person

Annexure-B of Form XXVII

[In case of purchase]

S.	Name	TIN /TDN	Sale / Tax	Name of	Weight /	Amount	Amount	Date	No. of
No.	and		invoice	the	Quantity		of VAT	of	TDS
	Addres		No. and	commodit	or		deducted	Payment	Certificat
	s of		Date	у	measure				e issued
	the				of the				
	person				goods				
	from								
	whom								
	deducti								
	ng								
	VAT								
1	2	3	4	5	6	7			
1									
-									

Place -	Signature, Name and
Date -	Designation of authorized person