

CHANDIGARH ADMINISTRATION
EXCISE & TAXATION DEPARTMENT



FORM VAT- 24

[See Rule 42]

LIST OF PURCHASES

Name :

Address :

VRN :

Tax Period: From: / / 2 0 To: / / 2 0

Supplier wise Summary of Purchases (within state)

Sn	VRN/TRN	Name & Address of selling person	Purchases value				Imports		Purchase from other States.	
			Tax Free	Exempted	Taxable	Amount of tax	Tax Free	Taxable	Tax Free	Taxable
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
Total :										

Date : / / 2 0

SIGNATURE & SEAL

**OF THE AUTHORISED
PERSON**