

FORM VAT-30

[See rule 52]

REFUND VOUCHER

Serial Number:

Place:

District

Registration No:

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Date:

		/			/	2	0		
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Firm name :

M/s

Address:

Date of application:

		/			/	2	0		
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Return From period

		/			/	2	0		
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To

		/			/	2	0		
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Amount of refund

Rs.

Due date for payment of refund:

Rs.

Interest due in case of delayed payment of refunds or decision resulting from acceptance of appeal:

Rs.

Approved for payment of refund

Rs.

Date of approval

		/			/	2	0		
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Amount of set off

Rs.

Amount withheld under Section 37

Rs.

Total amount of refund available by virtue of this authorization.

Rs.

Date:

		/			/	2	0		
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ASSTT. EXCISE AND TAXATION COMMISSIONER

District :

Information Collection Centre (if applicable):