

FORM XXIV-A

Department of Commercial Taxes, Government of Uttar Pradesh

[See rule-45(10) of the UPVAT Rules, 2008]

Return of Quarterly Tax Period

[To be filled in block letters only]

1.	Assessment Year	-																		
2.	Tax Period Ending on	-	d	d	-	m	m	-	y	y	y	y								
3.	Designation of Assessing Authority	-																		
4.	Name of Circle / Sector	-																		
5.	Name & address of the dealer	-																		
6.	Taxpayer's Identification Number [TIN]	-																		
6A	Taxpayer's PAN (Permanent Account Number)	-																		
7.	Details of Purchase [in Rs.]																			
	i.	Purchase of VAT goods from registered dealer	-																	
	ii.	Purchase of Non VAT goods from registered dealer																		
	iii.	Purchase of exempted goods																		
	iv.	Total																		
8-	Details of sale [in Rs.]																			
	i.	Turnover of sale of VAT goods	-																	
	ii.	Turnover of sale of exempted goods	-																	
	iii.	Turnover of sale of NonVAT goods	-																	
		Total	-																	
9	Tax Payable																			
	i.	Turnover of sale of VAT goods	-																	
	ii.	Tax @-----																		
10	Detail of tax deposited																			
	Name of the bank / branch	T.C. number	Date	Amount of tax																
	Total	in figure																		
	Total	in words																		

Annexure-Annexure -A (List of purchases from registered dealer)

Treasury Challan number..... / date

DECLARATION

I.....s/o,d/o,w/o/.....Status

[i.e. proprietor, director, partner etc. as provided in rule-32(6)], do hereby declare and verify that, to the best of my knowledge and belief all the statements and figures given in this return are true and complete and nothing has been willfully omitted or wrongly stated.

Date -

Signature -

Place -

Status -

Note- This application must be signed by a person who is authorized under rule 32 (6) of Uttar Pradesh Value Added Tax Rules, 2008.

Annexure - B

[See rule-45(10) of the UPVAT Rules, 2008]

List of purchases made from registered dealer against sale invoice																															
(i)	Name and address of purchasing dealer																														
(ii)	TIN																														
(iii)	Assessment year											-											Tax period ending on	d	d	m	m	y	y	y	y
(iv)	Name and address of selling dealer	TIN										Sale invoice No.	Date of Sale invoice	Description of commodity			Taxable value of goods	Amount of tax charged.	Total amount of Sale-invoice												
		Name	Code	Quantity / Measure																											
1																															
2																															
3																															
4																															
5																															

Name and signature of authorised person
Date