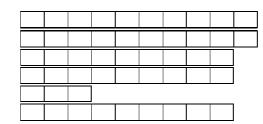
## Form No. 26QA

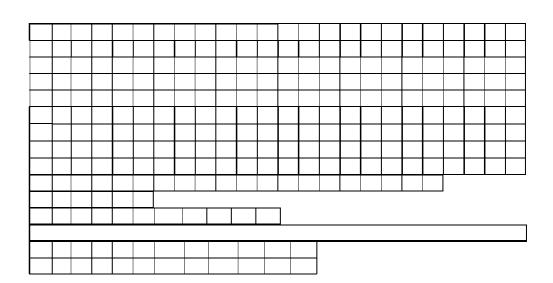
[See section 206A and rule 31AC]

Quarterly return for the quarter ended June/September/December/March (tick whichever applicable) of the Financial Year \_\_\_in respect of payment of interest to residents without deduction of tax under section 206A

## PART - A

- **1.** (a) Tax Deduction and Collection Account No. (TAN)
  - (b) Permanent Account No. (PAN)
  - (c) Financial year
  - (d) Assessment year
  - (e) Is this a revised return (Yes/No)
  - (f) If answer to (e) is 'Yes', then
    Provisional receipt No. of original return
- 2. Particulars of the Payer:
  - (a) Name
  - (b) Branch/Division/Office/Unit
  - (c) Address
    - (i) Flat/Premises No.
    - (ii) Name of the premises/building
    - (iii) Road/Street/lane
    - (iv) Area/location
    - (v) Town/City/District
    - (vi) State
    - (vii) Pin code
    - (viii) Telephone No.
    - (ix) E-mail
  - (d) Total amount of interest paid/credited (Part B)
  - (e) Total number of transactions reported (Part B)





## **VERIFICATION**

l,, l	nereby certify that all	the particulars furnish	ed are correct and o	comple	ete.																	
Place :			gnature of the princ mpany	iple of	ficer	of th	e ba	nking	g comp	any/c	o-op	erat	ive s	socie	ty/pu	ıblic						
Date :		Na	ame and designatio	n of th	ne pri	ncipl	e off	icer														
			(FOR	OFFI	ICE (	JSE)																
Receipt No.		Date	Name and sig stamp)					n rec	eiving	the qu	ıarte	rly r	eturi	ı (wi	th							
Quarterly re 206A	turn for the quarter e	ndedof the Fina		PART in resp		of pa	iyme	nt of	interes	t to re	eside	ents	with	out c	educ	ction	of t	tax	und	er s	ectio	n
(a) Name	e of the Payer :		Γ			Т												<u> </u>				_
(ii) N (iii) R (iv) A (v) To (vi) S (vii) P (viii) T	ess: lat/Premises No. lame of the premises oad/Street/lane rea/location own/City/District tate in code felephone No.	/building																				
(ix) E		-: -1/1it1	_																			_
(f) Total	amount of interest panumber of transaction  Is of the persons and		on which tax is not	liable	to be	e ded	lucte	d at s	source:													
S. No.	Name	PAN (Quote PAN wherever PAN is	Date of Birth	P	Amou Dep	ınt of	f Tim	e		rence					te of					oun tere		

		available. Mention 'NA' where PAN is not available)		Deposit		Deposit	paid/credited
(450)	(451)	(452)	(453)	(454)	(455)	(456)	(457)

Address of the payee												
S.	Flat/Premises	Name of the	Road/Street/La	Area/location	Town/City/District	State	Pin Code					
No.	number	premises/building	ne		_							
(450)	(458)	(459)	(460)	(461)	(462)	(463)	(464)					

Place:

Date: Name and designation of the principal officer of the banking company/co-operative society/public

company