

FORM 36

Receiver's or manager's abstract of receipt and payments

[Pursuant to section 424 read with 421 and pursuant to section 600 of the Companies Act, 1956]

Note - All fields marked in * are to be mandatorily filled.

1(a). *Corporate identity number (CIN) or foreign company registration number of company

(b). Global location number (GLN) of company

2(a). Name of the company

(b). Address of the registered office or of the principal place of business in India of the company

3. Particulars of receiver or manager

(a). *Income-tax permanent account number (PAN)	<input type="text"/>
(b). *Name	<input type="text"/>
(c). *Address	Line I <input type="text"/>
	Line II <input type="text"/>
(d). *City	<input type="text"/>
(e). *State	<input type="text"/>
(f). *Country	<input type="text"/>
(g). *Pin code	<input type="text"/>

4. *Charge identification (ID) number

5. *Instrument or court order details

(a) Description of the instrument or court order.

(b) Date of the instrument or court order (DD/MM/YYYY)

6. Abstract period

(a) *From (DD/MM/YYYY) (b) *To (DD/MM/YYYY)

7. *Number of receipts

8. *Number of payments

9. *Abstract (please proceed to next page for it)

Receipts			Payments		
S.No.	Description	Amount (in Rs.)	S.No.	Description	Amount (in Rs.)
	Brought forward			Brought forward	
1.			1.		
2.			2.		
3.			3.		
4.			4.		
5.			5.		
6.			6.		
7.			7.		
8.			8.		
9.			9.		
10.			10.		
11.			11.		
12.			12.		
13.			13.		
14.			14.		
15.			15.		
16.			16.		
17.			17.		
18.			18.		
19.			19.		
20.			20.		
21.			21.		
22.			22.		
23.			23.		
24.			24.		
25.			25.		
26.			26.		
27.			27.		
28.			28.		
29.			29.		
30.			30.		
31.			31.		
32.			32.		
33.			33.		
34.			34.		
35.			35.		
36.			36.		
37.			37.		
38.			38.		
39.			39.		
	Carried forward			Carried forward	

Receipts			Payments		
S.No.	Description	Amount (in Rs.)	S.No.	Description	Amount (in Rs.)
	Brought forward			Brought forward	
40.			40.		
41.			41.		
42.			42.		
43.			43.		
44.			44.		
45.			45.		
46.			46.		
47.			47.		
48.			48.		
49.			49.		
50.			50.		
51.			51.		
52.			52.		
53.			53.		
54.			54.		
55.			55.		
56.			56.		
57.			57.		
58.			58.		
59.			59.		
60.			60.		
61.			61.		
62.			62.		
63.			63.		
64.			64.		
65.			65.		
66.			66.		
67.			67.		
68.			68.		
69.			69.		
70.			70.		
71.			71.		
72.			72.		
73.			73.		
74.			74.		
75.			75.		
76.			76.		
77.			77.		
78.			78.		
	Carried forward			Carried forward	

Receipts			Payments		
S.No.	Description	Amount (in Rs.)	S.No.	Description	Amount (in Rs.)
	Brought forward			Brought forward	
79.			79.		
80.			80.		
81.			81.		
82.			82.		
83.			83.		
84.			84.		
85.			85.		
86.			86.		
87.			87.		
88.			88.		
89.			89.		
90.			90.		
91.			91.		
92.			92.		
93.			93.		
94.			94.		
95.			95.		
96.			96.		
97.			97.		
98.			98.		
99.			99.		
100.			100.		
Carried forward			Carried forward		

Attachments

1. Optional attachment(s) - if any

List of attachments

Declaration

To the best of my knowledge and belief, the information given in this form and its attachments is correct and complete. I am duly authorised to sign and submit this form.

To be digitally signed by

Receiver or manager

For office use only:

This e-Form is hereby registered

Digital signature of the authorising officer