

INCOME TAX VERIFICATION REPORT

File No _____

1. * Name of the Assessee :
2. *Address :
3. * PAN NO. :
4. Details of income :

*Assessment Year			
*Ward			
* Return filed on Date			
Total income (Amt. as per return filed with IT Department)			
Tax Paid on Total Income (Tax amt. as per Return filed with IT dept.)			
Any other information			

On the basis of investigation / verification done by us, we confirm that the Income and Tax particulars submitted as above are _____

Place:
Date :

Chartered Accountants
(Partner)