

FORM

ITR-V

## INDIAN INCOME TAX RETURN VERIFICATION FORM

Assessment Year

2008-09

[Where the data of the Return of Income/Fringe Benefits in Form ITR-1, ITR-2, ITR-3, ITR-4, ITR-5, ITR-6 &amp; ITR-8 transmitted electronically without digital signature]

(Please see Rule 12 of the Income-tax Rules, 1962)

PERSONAL INFORMATION AND THE DATE OF ELECTRONIC TRANSMISSION	Name UNNIKISHNAN.G			PAN ALZPG2275R			
	Flat/Door/Block No EDASSERIATH	Name Of Premises/Building/Village HOUSE		Form No. which has been electronically transmitted (fill the code) ITR-4	Status (fill the code) INDL		
	Road/Street/Post Office PERINGILIPURAM	Area/Locality ENNAKADU					
	Town/City/District MAVELIKARA	State KERALA	Pin 689624	Designation of Assessing Officer ITO WD-1, ALP/KRL/W/62/1			
	E-filing Acknowledgement Number 48448660311008			Date(DD/MM/YYYY) 31-10-2008			
	COMPUTATION OF INCOME AND TAX THEREON	1	Gross total income			1	142700
		2	Deductions under Chapter-VI-A			2	17376
3		Total Income			3	125320	
a		Current Year loss, if any			3a	0	
4		Net tax payable			4	1578	
5		Interest payable			5	45	
6		Total tax and interest payable			6	1623	
7		Taxes Paid					
a		Advance Tax	7a	0			
b		TDS	7b	0			
c		TCS	7c	0			
d		Self Assessment Tax	7d	1620			
e		Total Taxes Paid (7a+7b+7c+7d)			7e	1620	
8		Tax Payable (6-7d)			8	0	
9		Refund (7e-6)			9	0	
COMPUTATION OF FRINGE BENEFITS AND TAX THEREON		10	Value of Fringe Benefits			10	
	11	Total fringe benefit tax liability			11		
	12	Total interest payable			12		
	13	Total tax and interest payable			13		
	14	Taxes Paid					
	a	Advance Tax	14a				
	b	Self Assessment Tax	14b				
	c	Total Taxes Paid (14a+14b)			14c		
15	Tax Payable (13-14c)			15			
16	Refund			16			

## VERIFICATION

I, UNNIKISHNAN.G (full name in block letters), son/ daughter of GANGADAHARAN NAIR.G solemnly declare to the best of my knowledge and belief, the information given in the return and the schedules thereto which have been transmitted electronically by me vide acknowledgement number mentioned above is correct and complete and that the amount of total income/ fringe benefits and other particulars shown therein are truly stated and are in accordance with the provisions of the Income-tax Act, 1961, in respect of income and fringe benefits chargeable to income-tax for the previous year relevant to the assessment year 2008-09. I further declare that I am making this return in my capacity as authorized signatory and I am also competent to make this return and verify it.

Sign here



Date 31-10-2008

Place MAVELIKARA

If the return has been prepared by a Tax Return Preparer (TRP) give further details as below:

Identification No. of TRP	Name of TRP	Counter Signature of TRP

For Office Use Only

Receipt No

Date

Seal and signature of receiving official

0344067156  
0344067156



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