

ANNEXURE -001

Of Form IV (A) (Amended-1)

1. TDAN/TIN of the work contractor

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2. Name and Address of the work contractor

3. Period _____ To _____

4. LIST OF Form-8 Issued to the work contractor from whom TDS Deducted

SL. No.	Series and SL. No. of Form-8	Name and Address of the work contractor to whom Form issued	TIN of the work contractor to whom Form issued	Name of quarter(I,II,III or IV) to which form is related	Assessment year to which form is related	Amount of TDS for which form-8 issued
1.						
2.						
Total (1+2+.....)						

Signature of Authorized signatory

Status

10.	November									
11.	December									
12.	Quarter (III)									
13.	January									
14.	February									
15.	March									
16.	Quarter (IV)									
17.	Annual Return									
18.	Total									

Signature of Authorized signatory

Status

