FORM TR - 6

FOR PAYMENT OF SERVICE TAX (CHALLAN)

(Original)

Major Head 004	4 service Tax					
TR-6/GAR 7 Cha	allan No					
(Treasury Rule 9	2/Receipt & Paym	ent rules 26)				
Challan of amount paid into The (code No.)			Accounting Collectorate (Code No.)			
Name of the Bank/Branch with Code No.			Division Range	(Code No.) (Code No.)		
Name of the Foc (Code No.)	al Point Bank					
Name and addre	ess of the assessee	·				
(Code No) By	whom tendered				
Full Particulars of remittance and of authority	Head of accounts & Major Head (indicate against the appropriate Minor Head)	Accounting Code No.	By Cash Rs. Ps.	By Cheque Draft / Pay Order etc. Rs. Ps.	Counter Signature of the Departmental Officer (where required)	
Total				•		
(in words) Rs						
Date				Signatu	re of the tendere	
		(To be filled	l by the Bank)			
Received payment (in word)			Space for Focal Point Bank			
Stamp			indicating the date, amount			
Rupee			credited to Government Account.			
Bank's Receipt Stamp:			Signature of the Authorised Officer of the Bank			
Name of the Ban	nk					
	hat you have filled- roper adjustment o			the department wil	ll not be	