(Name and address of the person or the office of the person issuing the certificate)

(office letterhead may be used)

**Certificate of Collection of Tax**

[section 58 of the Income Tax Ordinance, 1984 (XXXVI of 1984)]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | | Date | | |
| 01 | Name of the person from whom tax has been collected | | | |
| 02 | Address | | | |
| 03 | Does the person have a Twelve-digit TIN? | | Yes | No |
| 04 | Twelve-digit TIN (if answer of 03 is Yes) | |  | |

05. Particulars of tax collection (add lines if necessary)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Sl | Date of Collection | Description of collection of tax | Section | Amount of tax collected ৳ | Remarks |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |
| Total | | | |  |

06. Payment of collected tax to the credit of the Government (add lines if necessary)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sl | Challan\*  Number | Challan date | Bank Name | Total amount in the challan ৳ | Amount relating to the this certificate ৳ | Remarks |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |
| Total | | | | |  |
| In words: | | | | | | |

\*if payment is made in any other mode specified by the Board, provide information relevant to that mode.

|  |  |
| --- | --- |
| Certified that the information given above is correct and complete. | |
| Name of the person issuing the certificate | Signature and seal |
| Designation |
| TCAN |
| Phone & E-mail | Date |