Inland Revenue Department - Malta

by a third party, with other information held by us. We will not disclose information about you to anyone outside the Inland Revenue Department unless permitted by law. The Inland Revenue Department, Floriana FRN 0170.

This form is to be sent to the Inland Revenue Department with the Monthly remittance.

Final Settlement System (FSS) Payer's Monthly Payment Advice

Α	Payer Information							
A	rayei illiomation							
	Business Name							
	Business Address	_						
	House /No.							
	Street							
	Locality		Г	Payer P.E.	No.		\top	7
			A1 [Doume and 6	au Mandle	of .		
	Postcode Talente and Navabase		A2	Payment fo	or ivioriti	101	\top	7
	Telephone Number		AZ [m m	у	у у	, y	
	Fax Number							
В	Number of Payees							
	Number of Payees (FSS Main or FSS Other Tax Deduction Method applies)	E	31				1	
	Number of Payees (FSS Part time Tax Deduction Method applies)	E	32					
С	Gross Emoluments							
	Gross Emoluments (FSS Main or FSS Other applies)	C1		€_			1	
	Gross Emoluments (FSS Part-time method applies)	C2					1	
	Taxable Fringe Benefits (Total of all Categories less any Non-Taxable Car Allowances)	C3					1	
	Total Gross Emoluments and Fringe Benefits	C4					1	
							_	
D	Tax Deductions and SSC due to IRD			€			_ (С
	Tax Deductions (FSS Main or FSS Other applies)	D1						
	Tax Deductions (FSS Part-time method applies)	D2						
	Tax Arrears Deductions (as per amount on PCU2(A))	D3						
	Total Tax Deductions	D4						
	Social Security Contributions	D5						
	Maternity Fund Contributions	D5a					╄	
	Total Due to Inland Revenue	D6						
E	Payment Details							
				€			(С
	Date of Payment Total Payment	E1					L	
	Details of Cheque (if applicable) Cheque No.			1				_
			≣2 _					
	Propoh	10.					\top	
	E3 E3							_
	Details of person making payment							
	Full Name Signature							
								-
	For Official Use Only Receipt No:							
	Date							