FO	RM-A	A		_	Compliant Governme	-	and other	documents
_		nt to section 209(1)(d), 600(3)(b) of the Communication Industry) Rules, 2011]	ompanies	Act, 19!	56 and rule	2 of the C	Cost Accounti	ing Records
		PART I - GI	ENERAL IN	FORMA	ATION			
No	ote: A	II fields marked in * are to be mandatorily	filled.					
1	(a)	*Corporate identity number (CIN) or foreign company registration number of the company						Pre-Fill
	(b)	Global location number (GLN) of company						
2	(a)	*Name of the company						
	(b)	*Address of the registered office or of the principal place of business in India of the company						
	(c)	*E-mail Address of the company						
3	(a)	*Financial year covered by the compliance report	From				(DD/MN	I/YYYY)
			То				(DD/MN	I/YYYY)
	(b)	*Date of Board of directors' meeting in to the compliance report was approved	which an	nexure			(DD/MN	I/YYYY)
4.	Detai	ls of the cost accountant						
	(a)	*Category of the cost accountant		O In	dividual	0 (	Cost account	ant's firm
	(b)	In case of individual, whether the cost ac is in permanent employment of the cor in practice		0	In Emplo	yment	O In	Practice
	(c)	*Name of the cost accountant or the cost accountant's firm who has certified the cost records of the						

(d) \*Income tax permanent account number of the cost accountant or the cost

company

			List of attach	ments
		11		
			Remove attac	chment
Verification: To the best of my knowledge complete.	and belief, the information	on given in this form an	d its attachme	ents is correct and
I have been authorized resolution number	by the Board of direct	tors' dated		(DD/MM/YYYY)
To sign and submit this for	m.			
I am authorized to sign and	d submit this form.			
To be digitally signed by:			_	
Managing Director or director or an authorized representation company)			pany)	Digital Signatures
*Designation				
*Director identification number the manager or of authorize income-tax PAN of the secretar quote his/her income-tax PAN)	d representative; or Me ary (secretary of a compar	mbership number, if a	pplicable or	
Director of the company				Digital Signatures
Director identification number	of the director			
Modify	Check Form	Pre-scrutiny		Submit
This e-form has been taken on basis of statement of correctn	•		ough electronic	mode and on the
	PAR	RT-II		
Attachments:				
Compliance report as per (Telecommunication Indus	_	ords		Attach
2 Optional attachments(s) –	if any			Attach

### FORM-B

## FORM OF COMPLIANCE REPORT

[See rule 2, and rule 5]

pra Re	being in permanent employment of the company or in actice, and having been appointed as cost accountant under Rule 5 of the Cost Accounting cords (Telecommunication Industry) Rules, 2011 of
(m exa	ention registered office address of the company) (hereinafter referred to as the company), have amined the books of account prescribed under clause (d) of sub-section (1) of section 209 of the d Act, and other relevant records for the period/year (mention the financial ar) and certify as under:
1	I or We have or have not obtained all the information and explanations, which to the best of my or our knowledge and belief were necessary for the purpose of this compliance report.
2	In my or our opinion, proper cost records, as per the Cost Accounting Records (Telecommunication Industry) Rules, 2011 prescribed under clause (d) of sub-section (1) of section 209 of the Companies Act, 1956, have or have not been maintained by the company so as to give a true and fair view of the cost of production or operation, cost of sales and margin of all the products and activities of the company.
3	Detailed unit-wise and product or activity-wise cost statements and schedules thereto in respect of the product groups or activities are or are not kept in the company.
4	In my or our opinion, the said books and records give or do not give the information required by the Companies Act, 1956 in the manner so required.
5	In my or our opinion, the said books and records are or are not in conformity with the generally accepted cost accounting principles and cost accounting standards issued by The Institute of Cost and Works Accountants of India, to the extent these are found to be relevant and applicable.
	ted: this day of 20 at (mention name of place of ning this report)
	SIGNATURE AND SEAL OF THE COST ACCOUNTANT (S)

MEMBERSHIP NUMBER (S)

#### NOTES:

- (i) Delete words not applicable.
- (ii) If as a result of the examination of the books of account, the cost accountant desires to point out any material deficiency or give a qualified report, he shall indicate the same against the relevant para.
- (iii) Briefly give your observations and suggestions, if any, relevant to the maintenance of cost accounting records by the company.
- (iv) Cost accountant may use separate sheet(s) for (ii) and (iii) above, if required.

### ANNEXURE TO THE COMPLIANCE REPORT

[See rule 2 and rule 5]

#### 1. GENERAL:

- a) Name of the company:
- b) Registered office address:
- c) Financial year to which the Compliance Report relates.

### 2. QUANTITATIVE INFORMATION:

Sno.	Name of the Product or Service	Unit	Annual	Ne	t Sales
	Group		Production	(Qty.)	(Value in
			(Qty.)		Rupees)
Α	Produced or Manufactured Product				
	Groups				
	1.				
	2.				
	3. etc.				
В	Services Groups				
	1.				
	2.				
	3. etc.				
С	Trading Activities (Product Group-				
	wise)				
	1.				
	2.				
	3. etc.				
D	Other Income				
Total	Income as per Financial Accounts				

#### 3. RECONCILIATION STATEMENT:

Net Margin (Profit or Loss) as per Cost Accounts	(In Rupees)
A. From Produced or Manufactured Product Groups	
B. From Services Groups	
C. From Trading Activities	
Total as per Cost Accounts	
Add: Incomes not considered in Cost Accounts (if any)	
Less: Expenses not considered in Cost Accounts (if any)	
Add/Less: Difference in Stock Valuation	
Profit or (Loss) as per Financial Accounts	

### **NOTES:**

- (i) For produced or manufactured product groups, use the nomenclature as used in the Central Excise Act or Rules, as applicable.
- (ii) For services groups, use the nomenclature as used in the Finance Act or Central Service Tax Rules, as applicable.

SIGNATURE NAME COST ACCOUNTANT (S) MEMBERSHIP NUMBER (S) SEAL DATE

"SCHEDULE"
[See rule 4]

### PROFORMA 'A'

## **Service-wise Costing Profit and Loss Statement**

Name of the Company:	
Name of Service:	

Licensed Area (if any)	
Period:	

(Rs. in Lacs)

Particulars	Current Year	(Rs. in Lacs Previous Year
Revenue (Net of Taxes)	Current rear	Trevious rear
Sales or Services		
Advertisement		
Content Sale		
Rentals		
Others (specify)		
Total Revenue		
A. Employee cost:		
Salaries, Wages, Incentives and Allowances		
Contribution to Provident fund etc.		
Staff Welfare Expenses		
Medical Expenses		
Training and Recruitment		
Others		
Sub-total (A)		
B. Administration cost:		
Rent (Other then Switching and Cell sites rent)		
Rates and taxes		
Insurance charges (Other than Network		
Elements)		
Communication costs		
Electricity		
Traveling and conveyance expenses		
Legal and professional charges		
Printing and Stationary		
Audit fees		
Maintenance		
Office Building		
Others		
Outsourcing Charges		
Billing Services		
Other administrative activities		
Others		
Sub-total (B)		

Particulars	Current Year	Previous Year
C. Sales and Marketing cost:		
Advertisement and sales promotion expenses		
Sales commission and Incentive		
Provision for bad and doubtful debts		
Bad debts write off		
Outsourcing Charges for customer care services		
Others		
Sub-total (C)		
D. Government charges:		
License fee		
License fee penalty, if any		
WPC Charges		
Radio Spectrum charges		
Microwave charges		
Others		
Sub-total (D)		
E. Depreciation:		
Buildings		
Plant and Machinery		
Others		
Sub-total (E)		
F. Leased Rentals:		
Equipment		
Real estate		
IT related services		
Customer Care		
Others		
Sub-total (F)		
G. Network Operating cost :		
Leased Circuits and Gateway Charges		
Royalty or Fee for technical know how		
Switching and Cell sites rent		
Installation Charges		
Maintenance Charges (New Elements)		
Network Consumables and spares		
Power and fuel		
Interconnection:		
a) Pass Through Charges		

Particulars	<b>Current Year</b>	Previous Year
b) Port charges		
c) Others		
Passive Infrastructure Charges		
Insurance Charges (Network Elements)		
Outsourcing Charges		
Others		
Sub-total (G)		
H. Other Cost:		
Corporate office expenses		
Common cost		
Loss on sale of fixed assets (net)		
Others		
Sub-total (H)		
I. Finance charges:		
Interest		
Bank charges		
Others		
Sub-total (I)		
Total Cost (A to I)		
Profit or (loss) before tax		
Total Capital Employed		
Return on Capital Employed (%)		
Return on Turnover (%)		

## PROFORMA 'B'

## **Product or Network Service-wise Costing Profit & Loss Statement**

Particulars	Products or Network Services against
	(Rs. In Lacs)
Period:	<u></u>
Licensed Area (if any):	
Name of Service:	
Name of the Company:	

	Α	В	С	etc.	Total
Revenue (Net of Taxes)					
Sales or Services					
Advertisement					
Content Sale					
Rentals					
Others					
Total Revenue					
(I) Direct Cost:					
A. Employee cost:					
Salaries, Wages, Incentives and Allowances					
Contribution to Provident fund etc.					
Staff Welfare Expenses					
Medical Expenses					
Training and Recruitment					
Others					
Sub-total (A)					
B. Administration cost:					
Rent (Other then Switching and Cell sites rent)					
Rates and taxes Insurance charges (Other than Network					
Elements)					
Communication costs					
Electricity					
Traveling and conveyance expenses					
Legal and professional charges					
Printing and Stationary					
Audit fees					
Maintenance					
Office Buildings					
> Others					
Outsourcing Charges					
Billing Services					
Other administrative activities					
Others					

Particulars	Products or Network Services agains each service					
	Α	В	С	etc.	Total	
Sub-total (B)						
C. Sales and Marketing cost:						
Advertisement and Sales promotion expenses						
Sales commission and Incentive						
Provision for bad and doubtful debts						
Bad debts write off						
Outsourcing Charges for customer care services						
Others						
Sub-total (C)						
D. Government charges:						
License fee					1	
License fee penalty, if any						
Expenses on amortization (one time entry fee )						
WPC Charges						
Radio Spectrum charges						
Microwave charges						
Others						
Sub-total (D)						
E. Depreciation:						
Buildings						
Plant and Machinery						
Others						
Sub-total (E)						
F. Leased Rentals:						
Equipment						
Real estate						
IT related services						
Customer Care						
Others						
Sub-total (F)						
Total Direct Cost (A+B+C+D+E+F)						
(m)						
(II) Network Element Operating cost (as per						

Particulars	Products or Network Services agains each service						
	Α	В	С	etc.	Total		
Proforma "C" )							
Х							
Υ							
Z							
Etc							
Total Network Element Operating Cost (II)							
(III) Support Function or Department Cost ( as per Proforma "D2")							
Total Support Function or Department Cost (III)							
Total (I) + ( II) + (III)							
Capital Employed ( as per Proforma F)							
Return on Capital Employed (%)							
Return on Turnover (%)							

## PROFORMA 'C' Cost Sheet - NETWORK ELEMENTS

Name of the Company:	
Name of Service:	
Licensed Area (if any):	
Period:	<u></u>
	(Rs. In Lacs)

Particulars	Network Elements						
	Х	Υ	Z	etc	Total		
(I) Network Direct Cost:							

Particulars	Network Elements				
	Х	Υ	Z	etc	Total
A. Employee cost:					
Salaries, Wages, Incentives and Allowances					
Contribution to Provident fund etc.					
Staff Welfare Expenses					
Medical Expenses					
Training and Recruitment					
Others					
Sub-total (A)					
B. Administration cost:					
Rent (Other then Switching and Cell sites rent)					
Rates and taxes					
Insurance charges (Other than Network					
Elements) Communication costs					
Electricity					
-					
Traveling and conveyance expenses					
Legal and professional charges					
Printing and Stationary					
Audit fees					
Maintenance					
Building					
Others					
Outsourcing Charges					
Billing Services					
Other administrative activities					
Others					
Sub-total (B)					
C. Network Operating cost:					
Leased Circuits and Gateway Charges					
Royalty or Fee for technical know how					
Rent (Network elements equipments and cell					
sites)					
Power and fuel					
Interconnection:					
i) Port charges			<u> </u>		

Particulars	Network Elements				
	X	Υ	Z	etc	Total
ii) Others					
Passive Infrastructure Charges					
Outsourcing Charges for network element					
equipments					
Others					
Sub-total (C)					
D Government charges:					
WPC Charges – DOT ( other than on revenue sharing)					
Paid to Government agencies other than DOT					
Sub-total (D)					
E Depreciation					
Building					
Plant and Machinery					
Others					
Sub-total (E)					
F Leased Rentals					
Equipment					
Real Estate					
Others					
Sub-total (F)					
G Total Network Direct Cost					
( A+B+C+D+E+F)					
H. Support Function cost as per Proforma E					
Sub Total H					
Total (G+H)					

\* PROFORMA 'D1'
Apportionment of Support Functions to various Services (For PROFORMA 'D2')
(Rs. In Lacs)

Support Function or Department Cost	Basis of Apportionment to Sub-Service specify	Service 1	Service 2	Service 3	Service 4	etc	Total
Administration							
Billing							
Branch Office							
Corporate Office							
Customer Care							
Finance & Accounts							
HR							
Insurance							
IT or EDP							
Legal or Regulatory							
Maintenance							
Marketing and Sales							
Planning and Development							
Quality							
Stores or Logistics							
Total							

## PROFORMA 'D2' Apportionment of Support Functions to various Products (For PROFORMA 'B')

(Rs. In Lacs)

Support Function or Department Cost	Basis of subsequent apportionment	Service from Proforma D 1			Service from Proforma D1			Total
	to Products specify	Product 1	Product 2	etc	Product 1	Product 2	etc	
Administration								
Billing								
Branch Office								
Corporate Office								
Customer Care								
Finance & Accounts								
HR								
Insurance								
IT or EDP								
Legal or Regulatory								
Maintenance								
Marketing and Sales								
Planning and Development								
Quality								
Stores or Logistics								
Total								

## PROFORMA 'E' Statement of CAPITAL EMPLOYED

Name of the Company: $\_$	
Name of Service:	
Licensed Area (if any):	 
Period:	

(Rs. In Lacs))

(Rs. In Lacs))					
Network Elements					
Х	Y	Z	Etc.		
	Ne	Network	Network Eleme	Network Elements	

Particulars	Ne	Network Elements			Total
	Х	Y	Z	Etc.	
Advance Rentals and Prepaid Card Revenue					
Sub total					
Net Working Capital (III)					
Total Capital Employed (I+II+III)					

## PROFORMA – 'F'

## Statement of Allocation or Apportionment of Capital Employed to Products or Network Services

Name of the Company: $\_\_$	 	
Name of Service:	 	
Licensed Area (if any):	 	
Period:		

(Rs. In Lacs)

	(113. 111 EdC3)				
Particulars	Products or Network Services			ces	
	А	В	С	Etc	Total
(a) Network element wise Capital Employed					
Radio Network:					
Х					
Υ					
Z					
Etc					
Subtotal ( A)					
(b) Support Function or Departments					
Administration					
Billing					
Branch Office					
Corporate Office					
Customer Care					
Finance and Accounts					
HR					
Insurance					
IT or EDP					
Legal or Regulatory					

Particulars	Pro	Products or Network Services			
	A	В	С	Etc	Total
Maintenance					
Marketing and Sales					
Planning and Development					
Quality					
Stores or Logistics					
Any Other Item (Specify)					
Subtotal (b)					
Total (a + b)					

## PROFORMA – 'G' Profit and Loss Reconciliation Statement

Name of the Company: \_\_\_\_\_

Period:			
	(	Rs. in Lacs	s)
Particulars	Revenue	Cost	Net Profit or (Loss)
Service 1			
Service 2			
Service 3			
Etc.			
Total			
Adjustments:			
Return on capital employed on network elements			
Non regulated business			
Elimination of inter business transactions			
Non relevant items:			
<ul> <li>Return on investments</li> </ul>			
<ul> <li>Non operating income</li> </ul>			
<ul> <li>Interest costs and financial charges</li> </ul>			
<ul> <li>Corporate Tax</li> </ul>			
<ul><li>Other taxes (if any)</li></ul>			
<ul> <li>Amortization of Goodwill</li> </ul>			

Particulars	Revenue	Cost	Net Profit or (Loss)
<ul> <li>Extraordinary items – such as abnormal loss due to fire or theft etc.</li> </ul>			
- Others			
Unallocated items			
Any other items (specify)			
Sub Total			
Total as per Audited Accounts			

# PROFORMA – 'H' Capital Employed Reconciliation Statement

Name of the Company: \_\_\_\_\_

(Rs. in Lacs)
Capital employed

### Notes:

- 1. Separate Proforma shall be prepared for each service or product and network elements in the Proforma prescribed for each area of operation or circle or licensed.
- 2. The cost shall be allocated or apportioned product wise as specified in appendix as far as possible
- 3. Proper record shall be maintained explaining the basis of allocation or apportionment for various elements of cost in respect of product or service or network elements & supporting functions.
- 4. The items of the cost shown in the Proforma are indicative and same shall be reflected keeping in mind the materiality of the item of the cost in the service or product or network service or network elements & support functions.
- 5. Capital Employed means average of net fixed assets (excluding intangible assets, effect of revaluation of fixed assets, and capital work in progress) plus net current assets existing at the beginning and close of the financial year.

[F. No. 52/7/CAB-2011]

**B.B.GOYAL** 

Adviser (Cost)