		NCOME TAX I	PAYMENT CHALI	LAN		
For 1-Bill Payment th bank please add pref			: 182736617			
RTO Sahiwal		7 2			2024	
Name of LTU/MTU/RTO		LTU/MTU/RTO Code			Tax Year	
Nature of Tax	Admitted Income Tax	Misc.	CVT		Month/Yea	ır
Payment  Demanded Income Tax  Advance Income Tax  Withheld Income Tax (Final)  (only for payment u/s 149)						
Withheld Income Tax (Adjustible) WPPF/WWF						
Payment Section 137		Admitted Income Tax		Payment :	Payment Section Code 9203	
(Section)		(Description of Payment Section) Acc		Account He	ount Head (NAM) B01134	
Taxpayer's Particulars (To be filled for payments other than Withholding Taxes) (To be filled in by the bank)						
CNIC/Reg./Inc. No. 36501-8043670-3						
Taxpayer's Name MUHAMMAD SALEEM State					BUSINESS IN	IDIVIDUAI
Business Name SALEEM LEATHER MERCHANT						
Address	HOUSE # 1051 GALI NO.7, BLOCK NO.7, CHICHAWATNI					
FOR WITHHOLDING TAXES ONLY						
	_		CNIC/Reg./Inc. No.			
Name of withholding	agent		-			
Total no. of Taxpayer		Total Tax Deducted				
Amount of tax in words: Six Thousand Two Hundred Rupees And No Paisas Only Rs. 6,200						
Amount of tax in words: Six Thousand Two Hundred Rupees And No Paisas Only Rs. 6,200  Modes & particulars of payment						
Sr. Type No.	Amount	Date	Bank	City	Branch Name	e & Address
1 ADC (e-		6,200			No Branch	3
payment)		 DECLAI	 RATION			
I hereby declare that the particulars mentioned in this challan are correct.						
CNIC of Depositor 36501-8043670-3						
Name of Depositor MUHAMMAD SALEEM						
Date						
					Stamp & Signature	
PSID-IT-000162	187325-002024					
Prepared By : guest_us	er - Guest User Date	: 14-Sep-2024 05:2	8 PM			
Note: This is an input form and should not be signed/stamped by the Bank. However, a CPR should be issued after receipt of payment by						
the Bank.		<u> </u>				