## E ITR-V

## INDIAN INCOME TAX RETURN VERIFICATION FORM

[Where the data of the Return of Income in Form ITR-1 (SAHAJ), ITR-2, ITR-3, ITR-4(SUGAM), ITR-5, ITR-7 transmitted electronically without digital signature].

Assessment Year 2018-19

(Please see Rule 12 of the Income-tax Rules, 1962)

	Name											PAN			
Ħ	MOHD ILIYAS SHAIKH											GGBPS1927K			
PERSONAL INFORMATION AND THE DATE OF ELECTRONIC TRANSMISSION															
	Flat/Door/Block No				Name Of Premises/Building/Village								lo. which		
	SK406CSMFT				NITYANAND NAGAR							has bee electror	nically	ITR-4	
	Road/Street/Post Office				Area/Locality							transm	ittea		
	GATE NO 4				WADALA EAST							Status Individual			
	Town/City/District				State				Pi	Pin/ZipCode		Aadhaar Number/ Enrollment ID			
	M	UMBA	I		MAHARASHTRA				400037		XXXX XXXX 0388				
	De	signatio	on of	AO (Ward / Circle) WA	RD 26(1)(4), MUMBAI						Origin	al or Revised	ORIGIN	IAL	
	E-f			wledgement Number	623889690240518 Dat						e(DD-M	M-YYYY)	24-05-201	18	
COMPUTATION OF INCOME AND TAX THEREON	_1											1		3087	00
	2	T										2			0
	3	Total a		me rent Year loss, if any	Marine.						3		3087	-	
	4			ayable								3a 4		1	0 48
	5			nd Fee Payable		- ////				5		-	0		
	$\frac{3}{6}$			Interest and Fee Payable	307	- 1	N			6					
	7	Taxes				9		<del>U</del>					4	48	
		a		vance Tax		A CASA	7a		ij,		0				
		b TDS c TCS				7b 7c			8628						
												$\dashv$			
		$\frac{c}{d}$	1	If Assessment Tax 7d							0				
		e Total Taxes Paid (7a+7b+7				N 201 (50)			7			7e		862	28
	8			ole (6-7e)	12.15	<del>्रभ</del> न्त	7 0	72.77		1		8		002	0
	9	Refu			-							9		818	
				Agriculture					- 64	7.7					
	10 Exempt Income				Oth	ners	Lack				10				
						VERIFICA	TION	1	117						
I, MOHD						OHD ISHAK							int Number _		
				of my knowledge and belie mowledgement number me											
				I and are in accordance wit											
				the assessment year 2018-											
SELF				and I am also com	petent to	o make this re	turn a	nd verify it.							
Sign here	Date 24-05-2018 Pl											MUM	BAI		
If the ret	urn l	has bee	n pre	pared by a Tax Return P	Preparei	r (TRP) give i	furth	er details as b	elo	w:					
Identifica	tion	No. of	TRP			Name of TRP							Counter S	ignature of	TRP
							1								
For Office Use Only Receipt No  Filed from IP address 103						.239									
Date											× 1-12		enetkæ.	: <b>=</b>	
Seal and signature of receiving official								GGBPS1927K0462388969024051828BB1664F965F7DEC3E9CE823298E4C7142BE3AC							