

19022513375883904262

Form No. 27A

Form for furnishing information with the statement of deduction / collection of tax at source (tick whichever is applicable) filed on computer media for the period Q2 (From 01/07/11 to 30/09/11 (dd/mm/yy)#)

1 (a) Tax Deduction Account No.	MUMO02862G
(b) Permanent Account No.	AAAJP0288R
(c) Form No	240

(6) 10111110.

2 Particulars of the deductor / collector

(a) Name	OFFICE OF THE CHIEF ENGINEER(WZ)
(b) Type of deductor*	AUTONOMOUS BODY (CENTRAL GOVT.)
(c) Branch / division (if any)	NA
(d) Address	
Flat No.	3RD FLOOR
Name of the premises/building	PRATISHTA BHAVAN
Road / street / lane	101 M.K. MARG
Area / location	CHURCHGATE
Town / City / District	MUMBAI
State	MAHARASHTRA
Pin code	400020
Telephone No.	22-22031415
E-mail	AIRCEWZ@VSNL.COM

(d) Financial Year	2011-12
()	2012.12
(e) Assessment year	2012-13
(0 D : 1	000000000000000000000000000000000000000
(f) Previous receipt number	070370600593576
(In case return/statement has	
been filed earlier)	

3 Name of the person responsible for deduction / collection of tax

(a)Name	SHOBHANA MENON
(b)PAN	ABBPM5358D
(c)Address	
Flat No.	3RD FLOOR
Name of the premises/building	PRATISHTA BHAVAN
Road / street / lane	101 M.K. MARG
Area / location	CHURCHGATE
Town / City / District	MUMBAI
State	MAHARASHTRA
Pin code	400020
Telephone No.	22-22031415
E-mail	AIRCEWZ@VSNL.COM

4 Control totals

Sr. No.	Return Type (Regular / Correction type)	No. of deductee / party records	Amount paid (₹)	Tax deducted / collected (₹)	Tax deposited (Total challan amount) (₹)
1	CORRECTION TYPE (C3)	81	4289341.00	274722.00	274722.00
Total		81	4289341.00	274722.00	274722.00

5 Total Number of Annexures enc	iosea
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6 Other Information

VERIFICATION

I, SHOBHANA MENON	, hereby certify that all the particulars furnished above are correct and complete.
Place: MUMBAI	Signature of person responsible for deducting / collecting tax at source
25/02/2019	SHOBHANA MENON, SENIOR ACCOUNTS
Date: 25/02/2019	Name and designation of person responsible for deducting / collecting tax at source OFFI

* Mention type of deductor - Government or Others

dd/mm/yy :- date/month/year