

## 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 01/07/10 to 30/09/10 (dd/mm/yy)#)

1 (a) Tax Deduction Account No.	MUMO02862G
(b) Permanent Account No.	AAAJP0288R
(c) Form No.	26Q

## 2 Particulars of the deductor / collector

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

(d) Financial Year	2010-11
(e) Assessment year	2011-12
(f) Previous receipt number	050259601354572
(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	PRATISHTHA BHAVAN	
Road / street / lane	M. K. ROAD	
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)	2	39950.00	806.00	26383.00
Total		2	39950.00	806.00	26383.00

5 Total Number of Annexures end	losed
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	Inform	

## VERIFICATION

I, SHOBHANA MENON , hereby certify that all the particulars furnished above are cor	rect and complete
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Place: MUMBAI	Signature of person responsible for deducting / collecting tax at source
Date: 02/03/2019	Name and designation of person responsible for deducting / collecting tax at source SHOBHANA MENON, AAO

\* Mention type of deductor - Government or Others

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