* Important : Please see notes overleaf before filling up the challan Single Copy (to be sent to the ZAO)																											
CHALLAN NO./ ITNS 283 Tax Applicable (Tick One)*																											
ITNS	283	(0036	(0036) BANKING CASH TRANSACTION TAX Financial Year																								
		(005)	(0050) DAINKING CASH IRANSACTION IAA																								
(0026) FRINGE BENEFITS TA								X											Assessment Year *								
Permanent A	Permanent Account Number																										
Full Name									•																		
Complete Address with City & State																											
				_																							
T-1 N-			-	 		_	-												D:								
Tel. No.								Tron	o of	Dox		nt ('	Ti alı	On	۵)				Pin	l							
Type of Payment (Tick One) Toy on Payment (400)																											
	Advance Tax (100) Self Assessment Tax (300) Tax on Regular Assessment (400)																										
DETAILS OF						Am	Ount	t (in 1	Rs (nly	7)						F	OR	USI	E IN	RE	CEI	VIN	G BA	NK		
Tax				\top		Amount (in				JIII.J	$\overline{\top}$	1									/ Cheque credited on						
Surcharge				_						+						1 г	T		-	Γ	, 011			_		 	
Education C	Cess			+								+	-			I) I	D		Ļ	M	M	1		7	7	Y
Interest SPACE FOR BANK SEAL																											
Penalty STATES TOR BANK SEARS																											
Others																											
Total																											
Total (in wo	ords)					1 1						1		1	1	1											
CRORES	LACS	TH	IOUSA	ANDS	5	HUN	NDR	EDS		TE	NS		U	NIT	S												
Paid in Cash	n/Debit to	A/c /0	Chequ	ie No).				D	atec	d																
Drawn on																											
(Name of the Bank and Branch)																											
Date:																											
Date: Signature of person making payment Rs.																											
Signature of person making payment Ks.																											
	Taxpayers Counterfoil (To be filled up by tax payer) SPACE FOR BANK SEAL																										
Received from																											
(Name)																											
Cash/ Debit to A/c /Cheque No. For Rs.																											
Rs. (in words)																											
drawn on																											
(Name of the Bank and Branch)																											
on account of *Advance Tax/Self Assessment Tax/Tax on Regular Assessment																											
				ck or												†											
of the Finan	cial Year		`		,				_	1	٠	,															
(i) in respec	t of Bank	ing Cas	sh Tra	ınsac	tion	Tax							-			1											
(ii) of Asses	(ii) of Assessment Year in respect of Fringe Benefit Tax - Rs.																										

*NOTES

- 1. Please use a separate challan for each type of payment.
- 2. Please note that quoting your Permanent Account Number (PAN) is mandatory.
- 3. Scheduled Banks while depositing Banking Cash Transaction Tax, may tick (0036) Banking Cash Transaction Tax and Self Assessment Tax (300) under Type of Payment.
- 4. Please note that quoting false PAN may attract a penalty of Rs. 10,000/- as per section 272B of I.T. Act, 1961.

5.	Tax payers may please d	raw/issue Cheque/DDs towards payment of income-tax as under:
	Pay	(Name of the bank where the Challan in being deposited)
	A/c Income-tax	

PLEASE USE THIS CHALLAN FOR DEPOSITING TAXES (TYPES OF PAYMENT) MENTIONED OVERLEAF. KINDLY DO NOT USE THIS CHALLAN FOR DEPOSITING TAX DEDUCTION AT SOURCE (TDS)

KINDLY ENSURE THAT THE BANK'S ACKNOWLEDGEMENT CONTAINS THE FOLLOWING:-

- 1. 7 DIGIT BSR CODE OF THE BANK BRANCH
- 2. DATE OF DEPOSIT OF CHALLAN (DD MM YY)
- 3. CHALLAN SERIAL NUMBER

THESE WILL HAVE TO BE QUOTED IN YOUR RETURN OF INCOME.