FORM	ITR-V	INDIAN INCOME TAX RETURN VERIFICATION FORM [Where the data of the Return of Income/Fringe Benefits in Form ITR-1, ITR-2, ITR-3, ITR-4, ITR-5, ITR-6 & ITR-8 transmitted electronically without digital signature] (Please see Rule 12 of the Income-tax Rules,1962) (Also see attached instructions)	Assessment Year 2007-08

PERSONALINFORMATION AND THE DATE OF ELECTRONIC TRANSMISSION

Name			**PAN**
Flat/Door/Block No	**Name Of Premises/Building/Village**		**Form No. which has been electronically transmitted** *(fill the code)*
Road/Street/Post Office	**Area/Locality**		
Town/City/District	**State**		**Status** *(fill the code)*
E-filing Acknowledgement Number		**Date(DD/MM/YYYY)**	/ /

COMPUTATION OF INCOME AND TAX THEREON

1	**Gross total income**			1	
2	**Deductions under Chapter-VI-A**			2	
3	**Total Income**			3	
4	**Net tax payable**			4	
5	**Interest payable**			5	
6	**Total tax and interest payable**			6	
7	**Taxes Paid**				
	a	**Advance Tax**	7a		
	b	**TDS**	7b		
	c	**TCS**	7c		
	d	**Self Assessment Tax**	7e		
	e	**Total Taxes Paid (7a+7b+7c +7d)**		7e	
8	**Tax Payable (6-7d)**			8	
9	**Refund (7e-6)**			9	

COMPUTATION OF FRINGE BENEFITS AND TAX TEREON

10	**Value of Fringe Benefits**			10	
11	**Total fringe benefit tax liability**			11	
12	**Total interest payable**			12	
13	**Total tax and interest payable**			13	
14	**Taxes Paid**				
	a	**Advance Tax**	14a		
	b	**Self Assessment Tax**	14b		
	c	**Total Taxes Paid (14a+14b)**		14c	
15	**Tax Payable (13-14c)**			15	
16	**Refund (14c-13)**			16	

VERIFICATION

I, _____(full name in block letters), son/ daughter of _____solemnly declare that to the best of my knowledge and belief, the information given in the return and the schedules thereto which have been transmitted electronically by me vide acknowledgement number mentioned above is correct and complete and that the amount of total income/ fringe benefits and other particulars shown therein are truly stated and are in accordance with the provisions of the Income-tax Act, 1961, in respect of income and fringe benefits chargeable to income-tax for the previous year relevant to the assessment year 2007-08. I further declare that I am making this return in my capacity as _____ and I am also competent to make this return and verify it.

Sign here ➔ **Date** **Place**

If the return has been prepared by a Tax Return Preparer (TRP) give further details as below:

Identification No. of TRP	**Name of TRP**	**Counter Signature of TRP**

For Office Use Only *Receipt No* *Date*	*Seal and Signature of receiving official*