GOVERNMENT OF ANDHRA PRADESH COMMERCIAL TAXES DEPARTMENT

FORM 550

CHEQUE REGISTER

Circle Name: Division: Date:	
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Sl. No.	Link No.	No. No./ DD No./ Pay Order No.	Date	Name of the Bank & Branch	Name of the Dealer	TIN/ GRN	TAX		Others		Challan No. / Remarks
							Rs.	Rs.			
1	2		4				8		9		10
							VAT	TOT	Penalty	Interest	