FORM VAT-30

[See rule 52]

REFUND VOUCHER

										Ser	ial Nun	nber:											
Place:												Distric	ct										
Registration No:													Date:		/		1	2	0				
Firm name :	M/s																						
Address:																							
Date of applicati	ion:			,		/	2	0															
Return period		rom			/			1	2	0				То			1			2	0		
Amount of refund			Rs.																				
Due date for pay refund:	Rs.																						
Interest due in c payment of refur resulting from appeal:	nds or de	ecision	Rs.																				
Approved for payment of refund												Rs.											
Date of																							

RUSHABH INFOSOFT LTD.

approval	
Amount of set off	
Rs.	
Amount withheld under Section 37 Rs.	
Total amount of refund available by virtue of this authorization.	
Rs.	
Date: / / 2 0	ASSTT. EXCISE AND TAXATION COMMISSIONER District:
	Information Collection Centre :