

Form LS-9

(See VAT-R1)

LIST OF SALE GOODS IN THE STATE FOR THE QUARTER ENDED**DD MM YY**

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Name and TIN of the VAT dealer furnishing the list

Name and style of business		M/s							
TIN 0	6								
		Economic Activity Code							
A - LIST SHOWING SALE OF GOODS TO REGISTERED DEALERS AT FULL RATE OF TAX									
Serial No.	Name with TIN of the registered dealer to whom goods sold (a)					Turnover of sale taxable at different rates (b)			
1.	(i) Name		(ii) TIN			(i)@ %	(ii)@ %	(iii)@ %	
2.									
3.									
.....									
	Total								

B. List showing sale of goods to authorised dealers at lower rate of tax applicable under Section 7(2)

Serial No.	Name with TIN of authorised dealer to whom goods sold (a)					Turnover of sale taxable at different rates (b)			
	(i) Name		(ii) TIN			(i)@ 0%	(ij)@ %	(ijj)@ %	
1.									
2.									
3.									
.....									
	Total								

Note:- In lists A and B,-

- There will be a single entry in respect of each registered/authorised dealer to whom goods have been sold during the return period. The date recorded on tax/sale invoice will be taken as the date of sale for the purpose of aggregating sale made during the return period and turnover of sale will be the amount on which tax has been charged in the invoice,
- Where a list runs into more than one page each page will show both page totals and progressive totals.

D. Summary of taxable sales made in the State during the return period

Sr. No.	Category of sale (a)	Turnover of sale taxable at different rates of tax (b)				
1.	Sale to registered dealers at full rate of tax(List A)	(i)@ 0%	(ii)@ %	(iii)@ %	(iv)@ %	(V)@ %
2.	Sale to authorised dealers at lower rate of tax (List B)					

3.	Sale to unregistered dealer consumers at full rate of tax					
4	Total of rows 1 to 3:					

Gross total of sub-columns (i) to (v)

Note:- Gross total of sub-columns (i) to (v) must tally with figure in 2C(b) of the return

DECLARATION

I,.....(name in CAPITALS), hereby declare that the contents of the above list and table are true and correct and nothing has been concealed therein.

Place:
 signatory
 Date:

Full signature of the authorised

 Name
 Status

Note: -An authorised person alone shall sign each page of this list. A list signed by any person not authorised or an unsigned list shall be treated as no list.