Government of Sindh
Sindh Revenue Board
Tax Payment Challan Form

SST-04
Section 30 Rule 13

NTN No. [ ][ ][ ][ ][ ][ ][ ][ ]-[ ]   STN No. S[ ][ ][ ][ ][ ][ ][ ][ ]-[ ]   Tax Period (Month / Year) [ ][ ]-2[ ][ ][ ]

Name

Address

Service   Service Code

TAX PAYMENTS

Head of Acco B - [ ][ ][ ][ ][ ]   **Sindh Sales Tax on Services**

Sr.	Description of Payment, whichever is applicable	Amount in Pak Rs.
1	Sales Tax on Services	
2	Additional Tax / Default Surcharge / Others	
3	Arrears	
4	Penalty/Fine	
	TOTAL Amount of Payment	

Amount in Words ____________________

Mode & Particulars of Payment

Mode of Payment   [ ] Cash   [ ] Cheque   [ ] Pay Order   [ ] Demand Draft

Cheque/Pay Order/Drfat No. ____________   Date ____________

Bank/Branch Name/City/Br-Code ____________

DECLARATION OF DEPOSITOR

I hereby declare that the particulars mentioned in this tax payment challan are correct to the best of my knowledge and belief.

CNIC [ ][ ][ ][ ][ ]-[ ][ ][ ][ ][ ][ ][ ]-[ ]

Name ____________

Date [ ][ ]-[ ][ ]-[ ][ ][ ][ ]
(DD-MM-YYYY)

Signature of Deposito

Note: *This is an input form and should not be signed/stamped by the Bank. A Computerized Payment Receipt (CPR) should be issued after receipt of payment by the Bank.*