FORM VAT-XV-E

[See rule 47 (5)]

Form of return to be furnished by a Lottery Dealer

	D D - M M - Y Y								
Origin	Original/Duplicate copy of return for the quarter ended on:								
1. Dealer's identity									
	and style of	M/s							
busine	-								
Addres	Address Contact No.								
TIN			Economic Activity Code						
2. Deta	ails of draws	during the ta	ax perio	d and tax payable	thereon				
Serial	Type of Dea	aler	No. of draws during the Lump				sum tax payable in		
No.				tax period res			ect of each draw		
				during the			e tax period		
(1)	Daily lottery								
(2)	Weekly lotte								
(3)	Monthly lot	•							
(4)	Festival lott								
(5)	Instant lotte	ry							
				Total Tax paya					
NT 4	D	•1 6 1		Paid				,	
Note:-	Date-wise det	ails of each t	ype of d	raw are attached	separate	ely as	per Anne	xure(s	S)
2 100	sount of f	anns nuinta	d undan	the Covernmen	t autho	witz,	on moduli	nad :	to 1
	count of for the state of the s			the Governmen	t autho	ority	or requi	reu	to i
auther	ilicated by As	sessing Auti	iority.						
Serial	Type of	Opening st	tock at	Blank forms	Number	of.	Number	of	
No.	Form	the beginn		received or		used		in	
		the return p	_	authenticated	during	the	stock at		
		P		during the	return		end	of	
				return period	period		return		
				1	*		period		
(1)	VAT-								
(2)	С			_					
	•	-			•		•		

List LP-1 appended

4. Aggregate price of goods purchased in the State

Declaration

I,
Place:
Date: {Signature}
Status: Tick ($$) applicable [Karta, proprietor, partner, director, president, secretary, manager, authorised officer]
(For use in the office of the Assessing Authority)
(1) Date of data entry in VAT-XVII register/ computer
(2) Signature of the official making the data entry: (Affix stamp of name and designation)
<u>ACKNOWLEDGEMENT</u>
Received from M/s
Assessing Authority/ Excise and Taxation Inspector, (when posted in circle outside District Headquarters) CircleDistrict
Date

Annexure to return in form VAT- XV-E

Date-wise details of Daily/Weekly/Monthly/Festival and Instant Draw during the period to

Sr.	Date	Name of	Number	Rate	Tax	Date	of	TR no. or	DCR
No.	of	organizer(s)	of	of	Pay-	paym	ent	DD No.	No.
	Draw	of the draw	draws	lump-	Able			Alongwith	and
			on the date	sum per		Due	Actual	the name	date
								of Bank	(to be
				draw					filled
									by the
									office)
				Total					

	claration hereby, solemnly affirm that I am authorised to re true and correct.
Place: Date: Status: Tick ($$) applicable {Karta, proprieto authorised officer]	[Signature] or, partner, director, president, secretary, manager,
Note: Separate statements to be attached for	or each type of draw.
Place:	Signature of the Dealer or his authorized agent