

ANNUAL VALUE ADDED TAX PAYABLE LEDGER

Tax Year: _____

Taxpayer Name: _____

VAT Reg. No: _____

Address: _____

Tax Office: _____

TAX PERIOD (MONTH)	VOUCHER / REF NO.	OUTPUT VAT (SALES)		INPUT VAT (PURCHASES)		NET VAT PAYABLE/ (REFUNDABLE) FOR PERIOD	PAYMENTS / ADJUSTMENTS			BALANCE CARRIED FORWARD
		TAXABLE AMT	VAT AMOUNT	TAXABLE AMT	VAT AMOUNT		DATE	REF / RECEIPT	AMOUNT PAID	
January										
February										
March										
April										
May										
June										
July										
August										
September										
October										
November										
December										
Total Annual:										

Prepared By

Reviewed By

Authorized Signature