

FORM:

TAX PERIOD:

CORPORATE VALUE ADDED TAX RETURN

1. TAXPAYER IDENTIFICATION & GENERAL INFORMATION

Registered Business Name			
Taxpayer Identification Number (TIN)		VAT Registration Number	
Registered Office Address			
Email Address		Telephone / Contact Number	

2. OUTPUT TAX (SALES & SUPPLIES)

Transaction Type	Gross Amount (Excl. VAT)	Output VAT
Standard Rated Supplies		
Reduced Rated Supplies		
Zero-Rated Supplies		
Exempt Supplies		
Exports		
Total Output Tax (Sum of Output VAT column)		

3. INPUT TAX (PURCHASES & IMPORTS)

Transaction Type	Gross Amount (Excl. VAT)	Input VAT Claimable
Domestic Purchases (Standard Rated)		
Domestic Purchases (Reduced Rated)		
Imports of Goods		
Imports of Services		
Capital Goods Purchased		
Total Input Tax (Sum of Input VAT column)		

4. TAX CALCULATION (NET PAYABLE / REFUNDABLE)

Net VAT Payable (Total Output Tax exceeds Total Input Tax)	
Net VAT Credit/Refundable (Total Input Tax exceeds Total Output Tax)	
Credit Carried Forward from Previous Period	
Final Net Tax Payable / (Credit Carried Forward)	

5. DECLARATION & AUTHORIZATION

I hereby declare that the information provided in this return is true, correct, and complete to the best of my knowledge and belief, and is in accordance with the provisions of the relevant Indirect Tax/VAT legislation.

Authorized Representative Name		Designation / Title	
Signature		Date (DD/MM/YYYY)	