		VAT TAX REMITTA TAXPAYER				- '	April 2007
	St. Vincent & the Grenadines Inland Revenue Department  Document No:			Due Date:			
Taxpayer Identification	Tax Period:	Assessment Period Date:		FOR INLA	AND REVENU	E DEPARTM	MENT USE
Number:	Tua i criou.	rissessment reriou puter		Amount	I TEVERYOR	DUE	PAID
		•		Tax			
SPRING H	DUSE, BEQU	IA		Penalty			
				Interest			
			-	Total			
				Signature	e of Revenue	Officer	,
VAT TAX	K RETURN			Documen	t No:		Due Date:
		Taxpayer Identification Number: 08959653	Tax Per	riod:	A	Assessment	Period Date:
<u> </u>	E PREVIOUS PERI ght forward from a pr						100
<b>COMPUT</b> A	ATION OF OUTPUT	<u>Γ TAX</u>					
200 Standard Ra	Standard Rated Supplies (sales): - VAT Inclusive (15%)						
	0 Accommodation, Land, Marine & Sea tours: - VAT inclusive (16%) 210						
	11 \ /					$\supseteq$	
						$\dashv$	
	PPLIES (sales) (Add	•		40 (			250
	• •						270
•	,						295
		· ·		,			
300 Value of Im		<u>CAX DEDUCTIONS</u>	300			$\neg$	
	mestic purchases on v	vhich VAT was paid	310			$\preceq$	
320 VAT paid to	VAT paid to the Comptroller of Customs on imports					ر 3	320
330 VAT paid o	VAT paid or payable on local Taxable Supplies (purchases)					3	330
_	VAT adjustments (e.g. debit notes received / credit notes issued)					3	340
395 TOTAL INI	TOTAL INPUT TAX FOR THIS TAX PERIOD (add lines 320 to 340)						
<u>COMPUTA</u>	TION OF TAX PA	YABLE TO INLAND REVE	<u>NUE</u>				
400 Tax payable	Tax payable for this tax period (if line 295 is greater than line 395, enter the difference here)  400						
410 Tax due (lin	Tax due (line 400 minus line 100) (if the result is less than 0, then enter 0 here)						410
*	O Amount paid on filing						420
430 Balance due	- if any (line 410 mi	nus line 420)				4	430
•		CREDIT TO TAXPAYER					
510 Total excess	credit to be carried f	orward to the next tax period					510
VAT on major car	oital acquisitions 60	0 Amou	int of zer	o-rated e	exports 61	0	

## **DECLARATION**

I hereby certify that the information given in this return is true, correct and complete in every respect and I further declare that I have the legal authority to submit this return

authority to sublint this return		
Name	Signature	

Position

Range of tax invoices used this period: from 620

Signature

Date \_\_\_\_\_

For Inland Revenue Department Use

630

to

Date paid:

Amount paid:

Signature of revenue officer: