FORM NO. 15AA

[See rule 28AA]

Certificate under section 197(1) of the Income-tax Act, 1961, relating to deduction of tax

Certificate No * To					Income-tax	x Office,	
				Date			
section being is not of	ereby authorise you urities/interest other ng insurance commissot applicable) payable ereby authorise you turities/insurance con ermentioned securities at each of the interest on securit/income in respect of the interest on security.	than intersion) or be by you to pay the new solution pay the new solution to p	erest on securities brokerage/rent/inco on the undermentine salary/interest of frent /income incredited in the nare and surcharge at the set other than interest of the securities.	s/insurance commme in respect of u oned securities/sun securities/intererespect of units ne of after rate oferest on securities	ission nits (st ims cre st othe payabl ter dec _ per c s/insur	/commissingly /commission	ion (not nichever nie name erest on on the ome-tax amount imission
 2A. I hereby authorise you to pay the undermentioned sum being in the nature of compensation or the enhanced compensation or the consideration or the enhanced consideration on account of compulsory acquisition of the capital asset without deduction of income-tax/after deducting income-tax at the rate of per cent and surcharge at the rate of per cent of such sum (strike out whichever is not applicable). 3. This certificate shall remain in force up to unless it is cancelled by me under intimation to you before that date. 					account educting r cent of		
			SCHEDULE	I			
Descr	ription of securities	Numb	er of securities	Date of securiti	es	Amoun	t of securities
	(1)		(2)	(3)	-	7 6	(4)
CI	Nome and address	of the	SCHEDULE		Do	riad for	Data of
SI. No.	Name and address person to whom the are given on inte	e sums	Amount of such sums	The date on which such sums were given on interest	which sum giv	riod for ch such ns were ven on terest	Rate of interest
(1)	(2)		(3)	(4)		(5)	(6)
SI.	SCHEDULE III SI. Name and address of person responsible for Amount of B insurance commission						

No.

paying insurance commission

(1)	(2)	(3)

SCHEDULE IV

SI. No.	Name and address of person responsible for paying salary	Period of employment	Amount of salary
(1)	(2)	(3)	(4)

SCHEDULE V

SI. No.	Name and address of persons responsible for paying rent	Amount of rent
(1)	(2)	(3)

SCHEDULE VI

SI. No.	Name and address of the mutual fund	Number of units	Class of units and face value of each unit	Total face value of units	Distinctive Nos. of units
(1)	(2)	(3)	(4)	(5)	(6)

SCHEDULE VII

SI.	Name and address of the person responsible for paying	Amount of compensation or
No.	compensation or the enhanced compensation or the	the enhanced compensation
	consideration or the enhanced consideration on account	or the consideration or the
	of compulsory acquisition of the capital asset	enhanced consideration
(1)	(2)	(3)

SCHEDULE VIII

SI.	Name and address of the person responsible for paying	Amount of commission (not
No.	commission (not being insurBance commission referred	being insurance commission
	to in section 194D of brokerage	referred to in section 194D)
		or brokerage
(1)	(2)	(3)

4. The certificate shall cease to be operative in respect of any of the securities/sums mentioned herein which are transferred/debited by the present holder to any other person, from the date you receive notice of such transfer/debit.

(SEAL)

Note: *Name and address of the person responsible for deducting tax.