# Government of India/State Department of -----

## **GSTR-7**

[See Rule.....]

#### **TDS Return**

<ol> <li>GSTIN:</li> </ol>	
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#### 4. TDS details

(figures in Rs.)

GSTIN of	Con				Date of Payment	Value on which TDS	TDS_IG	ST	TDS_CGST		TDS_SGST			
deductee	No	Date	Value	No	Date	Value	to deductee	is to be deducted	Rate	Amt	Rate	Amt	Rate	Amt
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)

## 4A. Revision in TDS details

(figures in Rs.)

Revised/Original	Cont	tract D	etails	Invoi	ce/Doci	ument	Revised/Original	Revised/Original	TDS	IGST	TDS	CGST	TDS_	SGST
GSTIN							<b>Date of Payment</b>	Value on which						
of deductee	No	Date	Value	No	Date	Value	to deductee	TDS is to be	Rate	Amt	Rate	Amt	Rate	Amt
								deducted						
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)

# 5. Liability payable and paid

(figures in Rs.)

Description	IGST Payable	CGST Payable	SGST Payable	Dr. No.	IGST Paid	CGST Paid	SGST Paid
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
TDS							
Interest on delayed payment of TDS							
Fees for late filing of return							
Others (please specify)							
Total							

## 6. Refund Claimed

S.No	Description	CGST	SGST	IGST
(1)	(2)	(3)	(4)	(5)
1.	Refund claimed from cash ledger			
2.	Bank Account Number*			

I hereby declare that the information given in this return is true, cor declare that I have the legal authority to submit this return.	rect and complete in every respect. I further
Place:	
Date:	(Signature of Authorized Person)

Note:

1. To be furnished by 10<sup>th</sup> of the month succeeding the month of deduction