

FORM - I

**Return of Income
(See sub rule (2) of rule (3))**

Name of Assessee

Address
.....

Assessment year

Source of Income	Total gross income (Rs.)
1	2
Professions	
Trades	
Callings	
Employments	
TOTAL	

Tax payable :

Amount paid, vide Challan No. :

The above statements is true to the best of my knowledge and belief.

Date

Signature of assessee.