

**TENTH SCHEDULE**

*(Regulation 22B(1))*

**STATEMENT OF INCOME RECEIVED FOR INCOME YEAR ENDED 30 JUNE ....**

*(To be given in duplicate by a payer to a payee not later than 15 August in the year of assessment)*

**1. IDENTIFICATION OF PAYER**

Full Name.....

Tax Account Number.....Business Registration Number.....

**2. IDENTIFICATION OF THE PERSON (PAYEE) TO WHOM AN AMOUNT HAS BEEN MADE AVAILABLE BY THE PAYER**

Full Name .....

Address.....

National Identity Card Number.....Bank Customer Identification Number.....

Tax Account Number.....Business Registration Number.....

**3. AMOUNT PAID OR CREDITED AND TAX DEDUCTED, IF ANY**

(Tick ( ) as appropriate)		<i>Gross amount paid or credited (before deduction of tax) Rs</i>	<i>Tax deducted &amp; remitted to MRA Rs</i>
<input type="checkbox"/>	Royalties	.....	.....
<input type="checkbox"/>	Rent	.....	.....
<input type="checkbox"/>	Payments made to contractor/subcontractor	.....	.....
<input type="checkbox"/>	Payments to architects, engineers, land surveyors, project managers, property valuers and quantity surveyors	.....	.....
<input type="checkbox"/>	Payments to attorneys/solicitors, barristers and legal consultants	.....	.....
<input type="checkbox"/>	Payments to medical service providers	.....	.....
<input type="checkbox"/>	Payments for procurement of goods and services	.....	.....
<input type="checkbox"/>	Payments for board and lodging	.....	.....
<input type="checkbox"/>	Payments to non-resident for services rendered in Mauritius	.....	.....
<input type="checkbox"/>	Interest	.....	.....
<input type="checkbox"/>	Payments made as management fees payable to an individual	.....	.....
<input type="checkbox"/>	Payments made to a non-resident entertainer or sports person	.....	.....
<input type="checkbox"/>	Payments to Accountant/Accounting firm and tax advisor or his representative	.....	.....
<input type="checkbox"/>	Fees in lieu of Director's fees paid to a company	.....	.....

**4. DECLARATION OF PAYER**

I.....

(Full name of signatory in **BLOCK LETTERS**)

do hereby declare that the information I have given in this statement is true and correct.

Date: .....



**SEAL**

Signature.....

Capacity in which acting .....