

**FORM T-7**  
**REFUND VOUCHER**  
 [See rule 11 (3)]

Book No..... Book  
 No.....  
 Voucher No..... Voucher  
 No.....

**Government of Himachal Pradesh**

Refund Order

Order for refund of tax or penalty  
 Refund payable to .....  
 India/ State .....  
 within three months of the  
 .....

Refund Order

Order for refund of tax or  
 Payable at the State Bank of  
 Bank of Patiala  
 date of issue.

Tax/Penalty realised vide Receipt-in-  
 Form 'T-1' or Challan in-Form 'T-2'  
 .....  
 .....  
 ..... (No. and date).

Date of order directing refund.....  
 .....  
 Amount of refund.....

To

Number in Daily Collection Register  
 Showing collections of amount  
 of Patiala.  
 Regarding which refund is made.....  
 .....  
 .....  
 .....  
 to the tax/  
 .....  
 Form 'T-1' or  
 Date of deposit of amount  
 .....  
 .....

The Officer Incharge,  
 State Bank of India/ State Bank

1. Certified that with reference  
 penalty realised vide Receipt in  
 Challan-in- Form 'T-2'

.....  
.....  
.....  
.....

Name of Treasury/ Sub Treasury in which  
.....  
Deposited  
.....  
.....

..... (No. and Date)  
.....

2. Certified that the tax/ penalty concerning which this refund is ordered has been credited in the treasury on ..... under the head  
.....

Total amount deposited out of order which refund is ordered. question has

3. Certified that no refund regarding the sum now in  
  
previously been issued and this order of refund has been entered in register of application for refund under my signatures.

Signature of the taxing authority/ Assistant Excise and Taxation Commissioner or the Excise and Taxation Officer, Incharge of the District/ Deputy Excise and Taxation Commissioner.

Signature of recipient of the Voucher ..... 4. Please pay to Shri (Name of the claimant) .....  
Date of encashment in the State Bank  
.....  
of India/ State Bank of Patiala  
Rs.....)

(Rupees.....)

.....  
On account of the above refund.

Place.....

Dated.....

Note:- A note to this effect has been kept in the Daily Collection Register to avoid double Payment.

(Signature with seal)  
Taxing authority/ Assistant Excise and Taxation Commissioner or the Excise and Taxation Officer, Incharge of the District/ Deputy Excise and Taxation Commissioner.

(Signature with seal)

Received payment.....

.....  
Taxing authority/ Assistant Excise  
Rs. ....  
and Taxation Commissioner or the  
.....  
Excise & Taxation Officer, Incharge  
only. ....  
of the District/ Deputy Excise and  
signature..... Claimant's  
Taxation Commissioner.

Signature of the Officer Incharge

of the Bank.

Date.....

Date.....