

FORM-GST-RFD-05

[See Rule-----]

Payment Advice

Payment Advice No: -

Date: <DD/MM/YYYY>

To <Centre> PAO/ Treasury/ RBI/ Bank

Refund Sanction Order No.

Order Date.....<DD/MM/YYYY>.....

GSTIN/ UIN/ Temporary ID < >

Name: < >

Refund Amount (as per Order):

	Central Tax	State Tax	UT Tax	Integrated Tax	Cess
Net Refund amount sanctioned					
Interest on delayed Refund					
Total					

	Details of the Bank	
i.	Bank Account no as per application	
ii.	Name of the Bank	
iii.	Name and Address of the Bank /branch	
iv.	IFSC	
v.	MICR	

Date:

Signature (DSC):

Place:

Name:

Designation:

Office Address:

To

_____ (GSTIN/ UIN/ Temporary ID)

_____ (Name)

_____ (Address)