

FORM –II

STATEMENT SHOWING PAY AND ALLOWANCE AND OTHER INCOME RECEIVED DURING THE YEAR 2009-2010

Month 1	Pay+PP 2	D. PAY 3	DA 4	HRA/ CCA 5	MA 6	Total 7	TPF 8	GI 9	SPFG 10	HF 11	LIP(SSS) 12	IT 13
March 2009												
April 2009												
May 2009												
June 2009												
July 2009												
August 2009												
September 2009												
October 2009												
November 2009												
December 2009												
January 2010												
February 2010												
Arrears 1												
Arrears 2												
Other												
TOTAL												
						TOTAL (2 to 6)		Grand Total (8 to 12)				

Dated :

Name : _____

Signature of the Assessee _____