



TAXPAYER'S RECEIPT

ST. CHRISTOPHER AND NEVIS - Inland Revenue Department

Document No. :

Due date:

BKL-01 BANK LICENCE

Tax Account No.:	Tax Period:	Assessment Period date: To	For Official use		Payment Date:	
			Amount	DUE	PAID	
			Tax			
			Penalty			
			Interest			
			Total			
			Signature of Revenue Officer			

PART 1 - TAXPAYER AND TAX IDENTIFICATION

Document No. :

Date Issued :

Tax Account No.:	Tax Period:	Assessment Period date: To	Due date:
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PART 2 - TAX DECLARATION AND CALCULATION

NOTE: Please return this form and payment to Inland Revenue Department in ST. KITTS.

The Banking Act (No. 19 of 1967)

This form, together with a Remittance for the Total Tax Due, should be sent to the Inland Revenue Department before the due date specified. Failure to submit this return on time will result in applicable interest and penalties being charged.

(10) Licence Fee Payable (10) _____

I certify that the information on this return is correct, complete, and fully discloses my liability for the related tax.	For Official use		Payment Date:	
	Amount	DUE	PAID	
	Tax			
	Penalty			
	Interest			
	Total			
Signature of Revenue Officer				

Signature: _____ Date: _____

Title: _____