KENYA REVENUE AUTHORITY

ISO 9001:2000 CERTIFIED ***VAT 3A***

DOMESTIC TAXES DEPARTMENT

MONTHLY VAT INPUT ANALYSIS

1. PIN [ ][ ][ ][ ][ ][ ][ ][ ][ ][ ][ ] 2. VAT NO [ ][ ][ ][ ][ ][ ][ ]

3. NAME OF REGISTERED PERSON ……..

4. P. O. BOX…….....CODE.....

5. TOWN …….

6. TELEPHONE ……

7. SUMMARY FOR THE MONTH OF……

(A) Invoice Date	(B) Tax invoice Number	(C) Customs Entry Number	(D) Name of Supplier	(E) VAT Reg. No.	(F) Brief Description of Supply	(G) Taxable Value	(H) VAT Claimed

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TOTALS							

Additional sheets can be used if original sheet is not enough.

NB:

- ***Total VAT claimed on this form should tally with Amount declared on VAT 3 return.***
- ***All applicable columns must be completed.***