

**APPLICATION FOR REFUND TO FOREIGN DIPLOMATIC MISSIONS /
CONSULATES, UNITED NATIONS ORGANISATIONS AND OTHER
INTERNATIONAL BODIES**

[Refer clause (a) of sub-rule (4) of rule 65]

01. Office Address

D	D	-	M	M	-	Y	Y	Y	Y

02. **Name of the organization**

03. Address

04. Period to which the claim relates

05. Amount of claim of refund

06. Details of purchases on which refund claimed

Quarter	Bill No./Retail invoice No.	Name and address of the dealer from whom purchased	TIN	Description of goods.	Quantity	Tax exclusive value of the goods	Tax paid
Total							

Place:

Authorised Officer
Seal

Dated the _____

Note : Please enclose copy of the letter of authorisation.