INTERNET MERCHANT ACCOUNTS
NAME OF THE BANK _____
FOR THE MONTH OF _____

Sr. No.	Account Number	Account Holder/ Merchant Name	Date of Transaction	Country where goods/ services exported	Particulars of transaction	Date Funds Received	Amount in USD	Mode of payment Visa/Master Card	E Form Number	E Form Date
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.
G.Total										

Certified that the information given above is checked and found correct.

Authorised Signature Authorised Signature

Information may be provided merchant wise.

The last date of submission is 7th working day of the succeeding month to which the said return relates.