## FORM GST DRC - 04

[See rule 142(2)]

Reference No:	Date:
То	
GSTIN/ID	
Name	
Address	
Tax Period	F.Y
ARN -	Date -
Acknowledgemer	t of acceptance of payment made voluntarily
The payment made by you vide a to the extent of the amount paid and for t	pplication referred to above is hereby acknowledge he reasons stated therein.
	Signature
	Name
	Designation
Copy to -	