

Attachment of P.N.D.3

Personal identification number
(Withholding tax agent in the case of individual)

Taxpayer identification number
(Withholding tax agent)


Branch No.
Page no.....of total.....page(s)

No.	Personal identification no. (of the recipient)	Taxpayer identification no. (of the recipient)	Detail of payment of assessable income				Total of tax withheld and remitted	
	Name of recipient of income		Payment date	① Type of income	Tax Rate	Amount Paid	Amount of tax	② Conditions
Address of recipient (Please specify No., Lane/Soi, Road, Sub-district, District, Province)		(If more than 1 type of income, please fill in items in order)						
	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						
	<input type="text"/>	<input type="text"/>						

(Fill in items in order for every attachment) Total amount of income and withholding tax (to be included with other attachment(s) of P.N.D.3(if any))

Note:

- ① Please specify the payment, e.g. building rent, accounting fee, legal fee, physician professional fee, construction, prize received from contest/competition/game show), movie actor, singer, musician, service, advertisement, etc.
- ② Please indicate conditions of withholding tax as follows:
 - Deducted at source, filled "1"
 - Paid tax for recipient every time, filled "2"
 - Paid tax for recipient one time, filled "3"


 Signed.....Payer of income
 (.....)
 Position.....
 Filing date: Date.....Month.....Year(B.E).....