



# **Sindh Workers' Participation Fund (SWPF)**

## **Payment Procedure**

# Step-1

Fill in the “Challan Form” available on SRB Website

	<b>Government of Sindh</b> <b>Sindh Revenue Board</b> <b>Fund Payment Challan Form</b>	 <small>Generating Revenue for People</small>
NTN No. <input style="width: 100px;" type="text"/>	Tax Period Year <input style="width: 50px;" type="text"/>	
Name <input style="width: 100%; height: 20px;" type="text"/>		
Address <input style="width: 100%; height: 20px;" type="text"/>		
<input style="width: 100%; height: 20px;" type="text"/>		
<b>Fund Payments</b>		
Head of Account <input style="width: 100px;" type="text"/>		
<b>WORKER PROFIT PARTICPATION FUND (SINDH)</b>		
Sr.	Description of Payment, whichever is applicable	Amount in Pak Rs.
1	Fund Contribution	
2	Default Surcharge/Others	
3	Arrears	
4	Penalty/Fine	
Total Payment		
Amount in Words _____		
<b>Mode &amp; Particulars of Payment</b>		
Mode of Payment <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Pay Order <input type="checkbox"/> Demand Draft		
Cheque/Pay Order/Drfat No. _____		Date _____
Bank/Branch Name/City/Br-Code _____		
<b>DECLARATION OF DEPOSITOR</b>		
I hereby declare that the particulars mentioned in this tax payment challan are correct to the best of my knowledge and belief.		
Name _____		
CNIC	<input style="width: 100%; height: 20px;" type="text"/>	
Date	<input style="width: 100%; height: 20px;" type="text"/>	
	<small>(DD-MM-YYYY)</small>	_____ <b>Signature of Depositor</b>

## **Step-2**

Present the filled-in Challan Form to any branch of NBP

**Note:** In case the fund is paid by means of cheque / pay order, it shall be in favour of:

**PAYEE = WORKER PROFIT PARTICIPATION FUND (SINDH)-G06316**

# Step-3

The payment shall be accepted through Government Receipt System (GRS) by NBP and a customer-copy of the system-generated CPR shall be handed to the taxpayer.

Customer Copy

 **NBP**  
National Bank of Pakistan

**Computerized Payment Receipt (CPR)**  
Govt. Collection - Provincial : Sindh

44 – NICOL ROAD KARACHI

**CPR No : 10162730058250**

Transaction Date	29-09-2016	Payment Mode	Cash
Depositor Name	AAMER ALI & MUZAMIL HUSSAIN SOOMRO	Contact No :	99217800

Head of Account	Description	Remarks	Amount
G06316	G06316 - Worker Profit Participation	PROVISIONAL TAX	10
Amount in Words : TEN ONLY			Total <u>10</u>

\*44-2016-09-29-C-10162730058250\*

10162730058250

**National Bank of Pakistan**  
Nicol Road, Br. (044) Karachi  
**29 SEP 2016**  
**RECEIVED**

Signature & Stamp of Manager/Authorized Officer

Print Date : September 29, 2016 4:18:29 pm

User : abrar.shah

## **Step-4**

The said copy of the CPR shall be the valid proof of payment and a copy of the same shall also be sent to SRB via email [swpf@srb.gos.pk](mailto:swpf@srb.gos.pk)

# HELPLINE

Email: [swpf@srb.gos.pk](mailto:swpf@srb.gos.pk)

Phone: 021-99217800-9 Ext: 158

UAN: 021-111-778-000