

Government of India /State
Department of -----

Form GST PMT -5
(See Rule ----)

Payment Register of Temporary IDs / Un-registered Taxpayers

Date: From – To ----
State –

Sr No.	Temporary ID	Name	CIN	CPI N	BR N	Date of payment	File No.	Amount Deposited																			
								CGST							IGST							SGST					
								T	I	P	F	O	Total	T	I	P	F	O	Total	T	I	P	F	O	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26		

Note --

T – Tax, I – Interest, P – Penalty, F - Fee, O - Other