			TAXPAYER'S	RECEIPT	Tax Cer	ntre:			
	ANTIGUA & BARBUDA - Inland Revenue Department					Document No. :		Due date:	
to any all to be to									
F14	Unincorporated Busin	ess Tax Q	uarterly Instalm	ent Declaration					
Tax Account N	o.: Tax Period:	Assessment Period date:		For Offic	For Official use Payment Date:		Date:		
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					Tax				
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						Officer for	Commiss	ionor	
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PART 1 - TAXE	PAYER AND TAX IDENTII	FICATION	Tax Account No.:	Document No. :	Filing r	number:	Tax	Period:	
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			Assessment Period date:		Date issi	Date Issued :		Due Date:	
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