## Form No. ADT-4

## **Report to the Central Government**

[Pursuant to sub-section (12) of section 143 of the Companies Act, 2013 read with rule 13 of the Companies (Audit and Auditors) Rules, 2014]



Form language

English

Hindi

Refer instruction kit for f	iling the form			
All fields marked in * are	e mandatory			
*Form filed by	O Statutory Auditor	0	Cost Auditor	O Secretarial Auditor
<b>Company Details</b>				
1 *Corporate Identity Nu	mber (CIN)			
2 (a) *Name of the comp	any			
(b) *Registered office a	address			
(c) *E-mail ID of the c	ompany			
Auditor's Details				
3 (a) SRN of ADT-1/CR	A-2 (as applicable)			
(b) Date of filing (DD/	MM/YYYY)			
4 Details of auditor or a	nuditor's firm			
(a) *Name of the audi	tor			▼
(b) Name of the audito	r's firm			
(c) *Membership numb	oer			
(d) Firm Registration n	number (FRN)			
(e) *Address Line 1				
Address Line 2				

*Country									
*Pin code/Zip code									▼
*Area/Locality									<b>▼</b>
*City									
District									
*State/UT									
(f) *E-mail ID									
Offence Details									
5 Details of the office or I  (a) *Number of offices	location w	here the sus	spected offe	ence is be	elieved	to have been or	is bein	g committe	ed
Is location of suspected offence same as the registered office of the company?	Address Line 1	Address Line 2	Country	Pincod code	e/Zip	Area/Locality	City	District	State/UT
Yes O No			V			▼			
O Yes O No			V			▼			
6 (a) *Full details of the su and the basis on wh (b) Period during which *From (DD/MM/Y	ich fraud	is suspected							
*To (DD/MM/YY	YY)								
Officer(s) Details									
7 Particulars of officers of	or employ	ees who are	suspected 1	to be inv	olved i	n the commissio	n of the	e offence, i	f any
(a) Number of officers									
Whether the suspect is Director or Employee	Nam		Design			or Identification		ermanent .	
		<b>Others</b> ▼			Numb	er (DIN)	N	umber (PA	AN)

[भाग II—खण्ड 3(i)] भारत का राजपत्र : असाधारण 29

Other Details			
8 (a) *Date of sending report to the Board or Audit Committee as pe (DD/MM/YYYY)	r rule 13(1)		
(b) *Whether reply was received from Board or Audit Committee	O Yes	O No	
(c) Date of reply received from Board or Audit Committee (DD/M			
(d) Summary of reply received			
9 (a) Whether auditor is satisfied with the reply of the Board or Audi	O Yes	O No	
(b) If no, reasons thereof			
10 *Estimated amount involved in suspected fraud.  Please enter the amount in INR only			
11 (a) *Has company taken any steps in this regard?	O Yes	O No	
(b) Details of steps, if any, taken by the company in this regard (Furnish full details with references)			
12 Any other relevant information			
Attachments			
(a) Copy of reply received from Board or Audit Committee	Copy of reply received	Choose	Remove Download
(b) Optional attachment(s) - if any	Copy of reply received	Choose	Remove
Verification			
I, * Proprietor/Partner of * Secretaries/Cost Accountants do hereby declare that the information respects including the attachments to this form.		redAccountants/C	
*To be digitally signed by		DSC BOX	
<ul> <li>Chartered Accountant (in whole-time practice)</li> <li>Cost Accountant (in whole-time practice)</li> <li>Company Secretary (in whole-time practice)</li> </ul>			
*Whether Associate or Fellow Associate Fellow			
*Membership number			
*Certificate of Practice number			

punishment for false statement / certificate and punishment for false evidence respectively.				
For office use only:				
eForm Service request number (SRN)				
eForm filing date (DD/MM/YYYY)				
Digital signature of the authorising officer	Pag Pay			
This eForm is hereby registered	DSC BOX			
Date of signing (DD/MM/YYYY)				

[F. No. Policy-01/33/2013-CL-V (Part-I)]

INDER DEEP SINGH DHARIWAL, Jt. Secy.

Note: The principal rules were published in the Gazette of India, Extraordinary, Part II, Section 3, Sub-section (i), *vide* number G.S.R. 246(E), dated the 31<sup>st</sup> March, 2014 and were last amended *vide* G.S.R. 248(E), dated the 1<sup>st</sup> April, 2021.