

Annexure to Form No.16

Name:

Emp No.:

	Particulars	Amount(Rs.)
Emoluments paid		
Perks		
	Gross emoluments	
Income from other sources		
	Total income from other sources	
Exemptions u/s 10		
	Total Exemption	

Date: **29.04.2010**
Place: **BANGALORE**

Full Name: **MR. R SUDHAKAR REDDY**
Designation: **ASSOCIATE MANAGER - FINANCE**