

## Omega Healthcare Management Services Pvt Ltd

### Tax Proof Submission for the Financial Year 2016 - 2017

<b>Employee Code:</b>	:	32458
<b>Employee Name</b>	:	SUJITH KUMAR R
<b>PAN No:</b>	:	DGCP51557P

**I. House Rent Details:**

Month Description	Location	Rent Amount	Attached / House Owner Details
April - 2016	Non-Metro	8300.00	Yes
May - 2016	Non-Metro	8300.00	Yes
June - 2016	Non-Metro	8300.00	Yes
July - 2016	Non-Metro	8300.00	Yes
August - 2016	Non-Metro	8300.00	Yes
September - 2016	Non-Metro	8300.00	Yes
October - 2016	Non-Metro	8300.00	Yes
November - 2016	Non-Metro	8300.00	Yes
December - 2016	Non-Metro	8300.00	Yes
January - 2017	Non-Metro	8300.00	Yes
February - 2017	Non-Metro	8300.00	Yes
March - 2017	Non-Metro	8300.00	Yes

**II. Deduction U/s 80:**

Section	Name	POLICY/RECEIPT NO	Proof Submitted	TOTAL
LIC PREMIUM	Self	767614142	15818.00	15818.00

**III. House Property Income/Loss**

LOSS FROM HOUSE PROPERTY		0.00
LOSS ON HOUSE LET OUT		0.00

**IV. Other Income / Previous Employer Income 12B / Form16**

OTHERS	0.00
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**Declaration**

I hereby declare that the above details are true to the best of my knowledge and belief.

I agree to submit the proofs for payments to be made in Feb'17 & Mar'17 by 05th Mar 2017. In case, I am unable to produce the proof by 05th Mar 2017, I also agree the company to deduct appropriate tax from my Mar'17 salary. The above investments have not been claimed by my family members except in case of specific declaration given by me and request you to consider the same for my tax computation

Date :04/01/2017

Signature :  
Name :

**INCOME-TAX RULES, 1962****FORM NO.12BB**

(See rule 26C)

**Statement showing particulars of claims by an employee for deduction of tax under section 192**

1. Name and address of the employee : SUJITH KUMAR R  
 2. Permanent Account Number of the employee : DGCPS1557P  
 3. Financial year : 2016-2017

Details of claims and evidence thereof			
Sl. No.	Nature of claim	Amount (Rs.)	Evidence / particulars
(1)	(2)	(3)	
1.	House Rent Allowance: (i) Rent paid to the landlord (ii) Name of the landlord (iii) Address of the landlord (iv) Permanent Account Number of the landlord Note: Permanent Account Number shall be furnished if the aggregate rent paid during the previous year exceeds one lakh rupees	99600.00	
2.	Leave travel concessions or assistance		
3.	Deduction of interest on borrowing: (i) Interest payable/paid to the lender (ii) Name of the lender (iii) Address of the lender (iv) Permanent Account Number of the lender (a) Financial Institutions(if available) (b) Employer(if available) (c) Others	0.00 , ,	
4.	Deduction under Chapter VI-A (A) Section 80C, 80CCC and 80CCD (1) Section 80C (2) Section 80CCC (3) Section 80CCD (B) Other sections (e.g. 80E, 80G, 80TTA, etc.) under Chapter VI-A.	15818.00 0.00 0.00	
<b>Verification</b>			
I, <b>SUJITH KUMAR R</b> , son/daughter of..... do hereby certify that the information given above is complete and correct.			
Place.....			
Date : 04/01/2017		Signature	
Designation .....		Full Name:.....	