| FORM NO.12BB                                    |                                                |
|-------------------------------------------------|------------------------------------------------|
| (See ru                                         | le 26C)                                        |
| Statement showing particulars of claims by an e | mployee for deduction of tax under section 192 |
| 1 Employee code/name: BV-0019-Aswathy Nai       |                                                |
| Address of the employee: 105 B, KV MEADO        | WS, 13TH CROSS VENKATAPURA EXTN,HSR SECTOR     |
| <sup>2</sup>  5,                                |                                                |
| 3 PAN of the employee: AFVPN1258D               |                                                |
| 4 Financial year: 2020-2021                     |                                                |
| Details of claims an                            | d evidence thereof                             |
| SI. No Nature of claim                          | Amount(Rs.) Evidence /particulars              |
| (1) (2)                                         | (3) (4)                                        |
| 1 House Rent Receipt                            |                                                |
| Rent paid to the landlord                       | Rent Receipts<br>0 with signed by<br>landlord  |
| Note: Permanent Account Number shall be fu      | urnished if the                                |
| aggregate rent paid during the Previous year    | exceeds one lakh                               |
| rupees and Benefit is available only for rent   | paid                                           |
| 2 Leave travel concessions or assistance        | 0                                              |
| 2 Income/loss from house property(Let out)      | 0                                              |
| 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 lende      | er en      |
| (a) Financial Institutions(if available)        |                                                |
| (b) Employer(if available)                      |                                                |
| (c) Others                                      |                                                |
| 4 Income from other sources                     | 0                                              |
| 5 Deduction under Chapter VI-A                  |                                                |
| 80C-PF                                          | 148044.00                                      |
| Verific                                         |                                                |
| I,Aswathy Nair son/daughter of hereby certif    |                                                |
| information given above is complete and cor     | rect.                                          |
| Place: Bangalore                                |                                                |
| Date: 17/04/2020                                | (Signature of the employee)                    |
| Designation: Staff Software Development En      | gineer - Test (SDET) Full Name: Aswathy Nair   |