## **Employee Declaration (Leave Encashment)**

١,	ANURAG	DAS	(name
of th	e employee), do herel	y confirm that prior	to UnitedHealth Group
□ emp	I have NOT receive loyer/s.	Leave Encashme	ent payment from any of previous
		OR	
deta	have received Leave ils of Leave Encashn se of previous employ	ent received and o	nent from previous employers. The claimed as tax exempt during the

Name of the Employer	Leave Encashment Received (in INR)	Leave Encashment claimed as tax exempt (in INR)
MU SIGNA BUSINESS SOLM	35063	
ANTUIT INDIA PUT LTD	11,450	
Total	46513	

I request you to kindly consider the above, while allowing / computing taxability of leave encashment in my hands.

I abide by the above declaration and the consequence thereof arising out of this declaration.

Employee Name: ANURAG DAS

Employee Number: 001388832

Date: 18 - Jan - 2022 Location: Bangalore