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CAPGEMINI TECHNOLOGY SERVICES INDIA LIMITED IPSF ID : 0049995531

Investment Proofs Submission Form for the Year 2020-2021

Employee ID*	158317	Gender*	F	Date of Joining	13/08/2018
Name*	Bharatha Priya R		No.of Children Going to School		0
PAN*	CCTPB2092L		No.of Children Going to Hostel		0
Regime Type	Old Regime				

Section A - Rent Paid for claiming HRA exemption (Only Rent Receipts will be considered)

From Date	To Date	Address	Rent Paid Per Month	Rent Paid Per Annual	Property ID
01/04/2020	31/03/2021	5/77 8th cross, nehru nagar, PTC, Karapakkam,CHENNAI,TAMIL NADU	8300.00	99600.00	1

As Per Last Declaration Section B - Chapter VI A - Deductions Value of Proof Attached

0	Medical Insurance - Self / Spouse / Children (<60 yrs) - With Insurance	0.00
0	Medical Insurance - Self / Spouse / Children (>=60 yrs) - With Insurance	0.00
0	Medical Insurance - Self / Spouse / Children (>=60 yrs) - Without Insurance	0.00
0	Medical Insurance for Parents (<60yrs) - With Insurance	0.00
0	Medical Insurance for Parents (>=60yrs) - With Insurance	0.00
0	Medical Insurance for Parents (>=60yrs) - Without Insurance	0.00
0	Medical Treatment/Handicapped Dependent (U/s 80DD) < 80%	0.00
0	Medical Treatment/Handicapped Dependent (U/s 80DD) > 80%	0.00
0	Interest on Educational Loan (U/s 80E)	0.00
0	Permanent Physical Disability (80U) < 80%	0.00
0	Permanent Physical Disability Severe Disability (80U) > 80%	0.00
0	Medical Treatment of Specified Diseases (80DDB)	0.00
0	Additional Housing Loan Interest Benefit (U/s 80EE)	0.00
0	Additional NPS Employee Contribution(80CCD1B)	0.00
0	Electric Vehicle Loan Interest Benefit (U/s 80EEB)	0.00
0	Additional Housing Loan Interest Benefit (U/s 80EEA)	0.00
0	Donation to Political Party (U/s 80GGC)	0.00
0	Deduction for Interest on Deposits in Savings Account (U/s 80TTA)	0.00
Section C - Chapter VIA - Section 80C		
0	Contribution to Pension Fund (80CCC)	0.00
0	Public Provident Fund (PPF) (SEC80C)	0.00
0	National Savings Certificate (NSC) (SEC80C)	0.00
0	Infrastructure Bonds (Term should be > = 3 years) (IBOND) (SEC80C)	0.00
0	Children Education Tuition fees (SEC80C)	0.00
0	Equity Linked Savings Scheme (ELSS) (SEC80C)	0.00
0	Mutual Funds (MF) (SEC80C)	0.00
0	Unit Linked Insurance Plan(SEC80C)	0.00
0	5 Year Deposit under Senior Citizen Saving Scheme	0.00
0	Cumulative Term Deposits	0.00
0	NPS Employee Contribution (Outside Contribution - other than Salary Deduction)	0.00
0	NPS Employee Contribution (SEC80C)	0.00
0	Sukanya Samriddhi Scheme (SEC80C)	0.00
0	5 Year Time Deposit in Post Office	0.00
0	Term/Fixed Deposit Scheme(Block period of 5 years)	0.00
0	NSC Interest (Will also be considered as Other Income) (SEC80C)	0.00
Section G -Other Income		
0	Bank Interest (excluding interest on savings account)	0.00
0	Dividend	0.00
0	Interest on Deposits in Savings Account (Considered as deduction u/s 80TTA upto Rs.10000)	0.00
0	Others	0.00
0	NSC Interest (Other Income)	0.00

Payroll Deduction	
Particulars	Amount
Provident Fund	23172.00
Payroll Deduction - Total	23172.00

Dependent Details:		
Dependent Name	Relationship	Age
Bharatha Priya R	Self	27
Ramasamy V	Father	65

Declaration:

- I hereby declare that I have read and understood the guidelines provided in "Proofs Option Document" and that, all information, documents provided are true and correct in all respects.
 - I also undertake to indemnify the company for any loss/liability that may arise, in the event of any incorrect information, documents provided by me.
- * Indicates mandatory fields as per our database. Please verify the same and if blank, please fill and submit the form.

HRA Land Lord Details				
Property Id	Landlord Name	Landlord Pan	Landlord Address	Annual Rent
1	Sivaranjani		5/577 8th cross, Nehru nagar, PTC, Karapakkam.	99600

HRA FUTURE RENT DECLARATION
CAPGEMINI TECHNOLOGY SERVICES INDIA LIMITED

EMP ID	158317
EMP NAME	Bharatha Priya R
RENT AMOUNT PER MONTH	8300
FOR THE PERIOD	01-01-2021 TO 31-03-2021
LANDLOARD NAME	Sivaranjani
LANDLOARD PAN	

The proofs/original rent receipts would be submitted on request along with the copy of the Self declaration.

Employee Declaration

I hereby declare that the information provided above is true and correct and will be solely responsible for any situation arising out of non-payment of the above rent.

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 | : Bharatha Priya R |
| 2. Permanent Account Number of the employee | : CCTPB2092L |
| 3. Financial year | : 2020-2021 |

Details of claims and evidence thereof			
Sl. No.	Nature of claim	Amount(Rs.)	Evidence/Particulars
(1)	(2)	(3)	(4)
1.	House Rent Allowance: (i) Rent paid to the landlord : Rs.99600 (i) Property No :1 (ii) Name of the landlord :Sivaranjani (iii) Address of the landlord :5/577 8th cross, Nehru nagar, PTC, Karapakkam. (iv) Permanent Account Number of the Landlord : (v) Annual Rent :99600	Rs.99600	House Rent Receipts
2.	Leave Travel Concessions or Assistance	Rs.0	Travel Receipts/Tickets
3.	Deduction of Interest on Borrowing: (i) Interest Payable/Paid to the Lender Self Occupied Interest - Property 1 : Self Occupied Interest - Property 2 : Self Occupied Interest : Let-Out Interest : (ii) Name of the Lender Self Occupied - Property 1 : Self Occupied - Property 2 : Let-Out : (iii) Address of the Lender Self Occupied : - Property 1 : Self Occupied : - Property 2 : Let-Out : (iv) Permanent Account Number of the Lender Self Occupied - Property 1 : Self Occupied - Property 2 : Let-Out : (a) Financial Institutions (b) Employer (c) Others	Rs.0.0	Provisional Certificate from Bank/Financial Institution/Lender

4.	Deduction under Chapter VI-A		
	(A) Section 80C, 80CCC and 80CCD		
	(i) Section 80C		
	(a) Provident Fund : Rs.23172	Rs. 23172.0	Photocopy of the investment proofs
	(ii) Section 80CCC :		
	(iii) Section 80CCD :		
	(B) Other sections (e.g. 80E, 80G, 80TTA, etc.) under Chapter VI-A.		
	(a) Medical Treatment of Specified Diseases (80DDB) : Rs.0		
	Verification		
	I, Bharatha Priya R , Son/Daughter of Ramasamy V . do hereby certify that the information given above is complete and correct.		
	Place : CHN STPI Anna S		
	Date : 09-01-2021		
		(Signature of the Employee)	
	Designation : ASSOCIATE CONSULTANT	Full Name: Bharatha Priya R	

Note: The information/details above, as required for deduction of tax u/s 192 of the Income Tax Act, has been entered by the employee through an authorized login on the portal.