2888 LE

Company	E	mployee Proof Sub	omission Form - EPSF for the ye	ar 2019 - 2	020		
	EPAM Systems India)				
Mame Employee Code	1	Lerson 1	effer			A .	
001	288818	PAN No D	whole laba		Gende	M	
SI		LEWING 13	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	100			
No		Description		Maximu	Amount for Which proof	Amount for Which	No of Docs Submitted
					is Submitted	proof is	
A INVESTME	NTS capped at Rs 1.5	Lac U/S 80C + Rs. Z	5000 for 80CCG + Rs 50000 for				
Public Prov	ident Fund (PPF)						
Voluntary F	Provident Fund (VPF)						
Life Insuran	nce Premium Paid (Lik	e LIC,ICICI Prudenti	al, TATA AIG etc	8	36,509		1
National Sa	vings Certificate (NSC	(1)			200		
Approved S	Superannuation Fund						
Interest acr	crued on NSC			1			
Units purch	nased from a recognis	ed mutual fund					
Children Ed	ducation Expenses / To	uition Fees					
-	an - Principal Paymen						
-			tion of house gronerty	-			
-		dan't supres or com	hames enforced in	-			
						1	
-	on to Pension / Annuil			-	-		
-	vt equity savings sche	eme(80CCG)					
6 Others							
7 80C Total L	imited to 1.5 Lakh Exc	cluding NPS					
Total 80C li	imited to 1.5 lakh + R	8s.25000 for 80CCG	+ Rs.50000 for 80CCD				
OTHER PER	MITTED DEDUCTION						
-			Rs 30,000/- (Senior Citizen))				
			25,000/- or Rs 30,000/- (Senior	Cit			
			5,000/- or Rs 1,25,000/-		1.1	1	
	ability above 80%))	Dependent pro			561000	1	
		Treatment for spe	ecified disease (up to Rs				
	oto Rs 60000/- for Pat				-		
80E - Repay	ment of Interest aga	inst Educational Lo	oan - Interest paid on loan only				
Interest on	House Property - Add	ditional Exemption					
80U - Perm	anent Physical Disabi	lity (Rs 75,000/- or	Rs 1,25,000/- (severe				
	pove 80%]) self only			-			
Total Invest	tments under chapte	er VI A excluding 80	OC as above	Charles and Charles	TO THE OWNER, WHEN		
	Under Section 10& 1	7					
	emption up to Rs. 15	(000/-)		1			
Medical (Ex				-			
Medical (Ex	el Allowance				100	000	
Medical (Ex Leave Trave RENT PAID					3,96	20 2	-
Medical (Ex Leave Trave RENT PAID	amount changes dur		ear please specify the amount		3,962	20 2	-
Medical (Ex Leave Trave RENT PAID (IF the rent and the per	amount changes dur	f rent amount paid	mare then Rs.8333 p.m. plea		3,96	200 2	
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