## PLEASE READ THE NOTES BEFORE FILLING UP THIS FORM

- 1. Provident Fund & LIC deductions through salary should not be shown in this form.
- 2. Amount paid / payable during the year April 2012 March 2013 should be shown under 'Amount' column.
- 3. No covering letter is required to be sent with this form.
- 4. If you have not yet applied for PAN, Please Apply for the same immediately.
- 5. Please do not enclose any proofs along with this Form. The date on which the proofs to be submitted will be intimated to you in due course.

	Read More Details an	d Instructions related	to the D	eclaration				
	INVEST	MENT DECLARATION	ON FOR	M FOR THE YEAR	APR :	2012 - MAR 2013		
Emplo	oyee Code		65800					
Emplo	oyee Name		Mr MAI	NIK PRABHU YER				
Pan N	lo		ABRPY	2492A				
		INVES	TMENT	PLAN FOR THE YE	AR			
I here	e by declare that my In	vestment plan for th	e currer	nt financial year is a	s follo	ws:		
Inves	tment Proposals Under	80 C						
S.No	Type of Investment			Amount (in Rs.) Proof Required			iter	
1	Life Insurance Premium Paid for self/spouse/children (Excluding the deductions through salary)			50417 Copy		Copy of Premium Re	py of Premium Receipt	
2	Public Provident Fund self/spouse/children	subscriptions for		0		Deposit receipt for PPF Account		
3	NSC (Only in the name	0		Copy of NSC certificate				
4	NSC Accrued interest - Purchased date and th note.			0		Copy of NSC certific	ate	
5	ULIP			0		Acknowledgement copy		
6	Principal repayment on Housing Loan			1020261		Certificate of Principal repayment from the Financial Institution		
7	Infrastructure Bonds	frastructure Bonds			0		Copy of Bond /Acknowledgement copy of payment	
9	Education Expense (P children going to scho No OF School going Children No OF College going Children		er of	0		Proof of expenses incurred (only the school fees, excluding donations/building fund)		
10	Equity Linked Saving Scheme (ELSS) / Tax Saving Mutual Funds.			0		Proof of investment		
11	Tax Saving fixed deposits(Minimum Lock in period of 5 years).		0		Proof of investment			
12	Post Office Time Deposits (Minimum Lock in period of 5 years).		0		Proof of investment			
S.No	Section	Remarks			Amount (in Rs.)		Proof Required Later	
1	Section 80CCC Pension Scheme (Section 80 CCC)	Investments made or any other insure		an Suraksha of LIC			Copy of premium paid receipt	
2	Section 80D Mediclaim Insurance Premium	80D   Premium should be paid by			0		Copy of premium paid receipt	

3	Section 80 E Education Loan Repayment [No Limit and dependan applicable]				n Interest for self	0		Certificate from Lender		
4	Section 80 DD Maintenance / Medical treatment of Handicapped Dependant  Say Yes/No ar with the deper				ur relationship	0			Self- Declaration of expenditure incurred & Certificate from Govt.Doctor	
5	Section 80 U Deduction in respect of person with disability		Deduction is allowed to a person suffering from a permanent physical disability  Select Disability Level Select			0			Certificate from Govt, Doctor	
6	New Pension (NPS)	New Pension Scheme (NPS)				0			Copy of paid reciept	
7	(If DOJ in the present organization is after 1st April 2012 then		Salary Income after deduction under Sec.10 Previous PT Previous PF Tax Deducted by previous employer		54274 200 780 0			Form 16 from previous employer		
	e Rent Deta	ils		I		<u> </u>	I	I	C. D	
SI.No	Month	Amount	partic			Remarks	Amount	Proo	fs Required Later	
	April	6500		City Name Non-Metro						
	May	6500	Non-Metro							
	June 6500 Non-Me		Non-Metro							
			Non-Metro							
	August	6500		Non-Metro Non-Metro						
1	September	6500					Re		nt receipts	
	October 6500  November 6500  December 6500  January 6500  February 6500		Non-Metro					. terre i eeerpte		
			Non-Metro							
				Non-Metro Non-Metro Non-Metro						
	March	6500		Non-Metro						
INCOME / (LOSS) FROM HOUSE PROPERTY										
PROI	PERTY 1		1		1	11				
2 Int (Se	2 Interest on Housing Loan (Section 24)		Mention whether the property is (Self occupied / Let out)  SelfOccupied LetOut		Amt of Interest p 88165  Amt of Rent Rece 0  Amt of municipal paid: 0	eived	Certificate from Le with Form 12 C		n Lender along	
	Name ICICI			Taken on : Feb	oruary	2008			Date of	
possession / Expected date of possession: September 2009										
PROPERTY 2										

		erest on Houction 24)	using Loan 2	Mention whether the property is (Self occupied / Let out) SelfOccupied LetOut	Amt of Interest paid:  0  Amt of Rent Received  0  Amt of municipal taxe paid:  0	s	Certificate from Lender along with Form 12 C		
Bank Name Loan Taken on : Date of								te of	
possession / Expected date of possession:									
DECLARATION OF MEDICAL AND LTA UNDER SECTION 10 TOWARDS SUBMISSION OF BILLS IN THE YEAR END									
SI.	.No	Particulars		Remarks			Amount	Proofs Required Later	
1		LTA	accompanied Motor vehicle license of tra- details, PAN r places of Orig and the Journ 1997, by any exceeding the	s of private car operator, by a bill giving proper de number, address of the vel agency, mode of payr number of travel agency of if Journey and destinates is performed on or affirmed of transport other a AC First Class Air fare both attention shall be allowed a	ot O	0			
De	ecla	ration							
		•			orrect. I undertake to info g declaration will be my re		• • •	ange in the	
La	Last Updated On: 16/01/2013								