

FORM FOR CLAIMING SAVINGS OTHER THAN EMPLOYEE'S NAME
(For investments in the name of Wholly/mainly dependant parents, spouse,
Children)

I Mr. / Ms _____ Emp No. _____

Declare that, I have made the following investment in the Name of

Mr. / Ms _____ who is my _____,

and the Income Tax Exemption on the same is claimed only by me and not by my spouse or other person.

Details of Investment

(FINANCIAL YEAR 2018-2019)

Sl No. TYPE

AMOUNT (In Rs.)

1.

2.

3.

4.

5.

6.

Total

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I also undertake to reimburse to the Company, any liability arising out of dis-allowance of any of the above exemption by the Income tax authorities on account of error in claim.

Place :

Date :

(SIGNATURE OF THE EMPLOYEE)

I, NAME OF SPOUSE/OTHER PERSON, do declare that what is stated above is true to the best of my information & belief

Place :

Date :

(SIGNATURE OF THE SPOUSE/OTHER PERSON)