

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: Subbareddy Annapureddy
2. Permanent Account Number of the employee: AJWPA4154G
3. Financial year: 2022-2023

Details of claims and evidence thereof			
Sl. No.	Nature of claim	Amount (Rs.)	Evidence / particulars
(1)	(2)	(3)	(4)
	House Rent Allowance: Total Rent Paid:0.00		
2.	Leave travel concessions or assistance	LTA claimed as per FBP Claim process during the financial year	As per FBP claims
3 a.	Deduction of interest on borrowing: Self Occupied Property		As attached
	(i) Interest payable/paid to the lender	0	
	(ii) Name of the lender		
	(iii) Address of the lender		
	(iv) Permanent Account Number of the lender		
	(a) Financial Institutions(if available)		
	(b) Employer(if available)		
	(c) Others		
3 b.	Deduction of interest on borrowing: Let Out		As attached
	Income/Loss on House Property	0	
	(i) Interest payable/paid to the lender	0	
	(ii) Name of the lender		
	(iii) Address of the lender		
	(iv) Permanent Account Number of the lender		
	(a) Financial Institutions(if available)		
	(b) Employer(if available)		
	c) Others		
4)	Deduction under Chapter VI-A		
	(A) Section 80C,80CCC and 80CCD		
	(i) Section 80C		

(a) Life Insurance Premium	25804	As attached
(b) 5 year time deposit under the Post Office Time Deposit Rules 1981	0	
(c) Unit Linked Insurance Plan (ULIP)	0	
(d) Deposit in NSC	0	
(e) Public Provident Fund	150000	
(f) House loan principal repayment / Stamp Duty / Registration (Housing Loan)	0	
(g) Children Education (Only Tuition Fee)	0	
(h) Mutual Fund - Only Tax Saver Funds	0	
(i) 5 Year Term Deposit	0	
(j) Sukanya Samriddhi Scheme	150000	
(j) Deposit in NSS		
(k) Interest on NSC	0	
(l) Section 80CCD(1B) NPS	50000	
(ii) Section 80CCC	0	
(iii) Section 80CCD	0	
(B) Other sections (e.g. 80E, 80G, 80TTA, etc.) under Chapter VI-A.		
(i) Mediclaim Insurance for Self/Spouse and Children	0	
(ii) Mediclaim Insurance for Parents	0	
(iii) Mediclaim Insurance for Parents(Senior Citizen)	0	
(iii) Preventive Health checkup	0	
(iv) Handicapped dependent either Rs. 75,000 or Rs. 1,25,000	0	
(v) Includes only interest paid on education loan	0	
(vi) Deduction for self disability/ handicapped either Rs. 75,000 or 1,25,000	0	
(vii) Rajiv Gandhi equity saving scheme(80CCG)	0	
(viii) Interest paid on housing loan (80EE)	0	
(viii) Interest paid on housing loan (80EEA)	0	
(viii) Interest paid on vehicle loan (80EEB)	0	
(ix) Exemption from Saving Bank Interest	0	
(x) Medical treatment for specified diseases.	0	
(xi) Other Income	0	

Verification

I, **Subbareddy Annapureddy**, son of **sambireddy** do hereby certify that the information given above is complete and correct.

Place: HYDERABAD

Date.....

(Signature of the employee)

Designation :

Full Name: Subbareddy Annapureddy