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|----------------------------|--|--|------------------------|-------------------------|----------------|
| | | sing the scan image option using the link "Upl nsolidate all the images of your investment pro | | | copy proofs |
| STANDARD CHART | TERED GLOBAL BUS | SINESS SERVICES PRIVATE LIMITED | | IPSF ID : | 0096010694 |
| Investment Proof | s Submission Form | for the Year 2019-2020 | | | |
| Employee ID * | 1610903 | Gender * | М | Date of Joining | 19/08/2019 |
| Name * | Yashwanth PC | | No. of Children going | to School * | 0 |
| PAN * | DCOPP2513N | | No. of Children going | to Hostel * | 0 |
| Section A - Rent P | aid for claiming HR | A exemption (Only Rent Receipts will be consi | dered) | | , |
| From Date | To Date | Address | Rent Paid Per Month | Rent Paid Per Annual | Property ID |
| 19/08/2019 | 31/03/2020 | 102,prafulla nivas,2nd floor,2nd cross,peekayam l ayout,hosapalya,hsr sector-6,bengaluru-560068,BA NGALORE,KARNATAKA | 8300.00 | 61581.00 | 1 |
| As Per Last Declaration | Section B - Chapte | er VI A - Deductions from Total Income | | Value of Proo | f Attached |
| 0 | Medical Insurance fo | or Parents (<60yrs) - With Insurance | | | 0.0 |
| 0 | Medical Insurance for | or Parents (>=60yrs) - With Insurance | | | 0.0 |
| 0 | Medical Insurance - | Self / Spouse / Children (<60 yrs) - With Insurance | | | 0.0 |
| 0 | Medical Insurance - | Self / Spouse / Children (>=60 yrs) - With Insurance | | | 0.0 |
| 0 | Medical Insurance for | or Parents (>=60yrs) - Without Insurance | | | 0.0 |
| 0 | Medical Insurance - | Self / Spouse / Children (>=60 yrs) - Without Insura | nce | | 0.0 |
| 0 | Medical Treatment/I | Handicapped Dependent (U/s 80DD) < 80% | | | 0.0 |
| 0 | Medical Treatment/I | Handicapped Dependent (U/s 80DD) > 80% | | Ì | 0.0 |
| 0 | Medical Treatment o | of Specified Diseases (80DDB) | | | 0.0 |
| 0 | Interest on Education | onal Loan (U/s 80E) | | | 0.0 |
| 0 | Permanent Physical | Disability (80U) < 80% | | | 0.0 |
| 0 | Permanent Physical | Disability Severe Disabilitty (80U) > 80% | | | 0.0 |
| 0 | Medical Treatment o | of very senior citizen (80DDB) | | | 0.0 |
| 0 | Medical Treatment f | or Specific Disease (U/s 80DDBSC) | | | 0.0 |
| 0 | Additional Housing L | Loan Interest Benefit (U/s 80EE) | | İ | 0.0 |
| 0 | Additional NPS Empl | loyee Contribution(80CCD1B) | | ĺ | 0.0 |
| 0 | Additional Housing L | Loan Interest Benefit (U/s 80EEA) | | ĺ | 0.0 |
| | Section C - Chapte | er VIA - Section 80C | | | |
| 0 | Contribution to Pens | sion Fund (80CCC) | | | 0.0 |
| 0 | Public Provident Fun | nd (PPF) | | | 0.0 |
| 0 | National Savings Ce | rtificate (NSC) | | i | 0.0 |
| 0 | Infrastructure Bonds | 5 | | İ | 0.0 |
| 0 | Children Education | Fuition fees | | | 0.0 |
| 0 | Mutual Funds/ELSS | | | ĺ | 0.0 |
| 0 | Unit Linked Insurand | ce Plan | | | 0.0 |
| 0 | 5 Year Deposit unde | er Senior Citizen Saving Scheme | | | 0.0 |
| 0 | Cumulative Term De | eposits | | | 0.0 |
| 0 | 5 Year Time Deposit | t in Post Office | | | 0.0 |
| 0 | NPS Employee Cont | | | | 0.0 |
| 0 | Sukanya Samriddhi | Scheme | | | 0.0 |
| 0 | | ne (Block Period of 5 yrs) | | | 0.0 |
| 0 | | lso be considered as Other Income) | | | 0.0 |
| | Section G - Other | · | | | |
| 0 | | ding interest on savings account) | | | 0.00 |
| | 1 | | | | |

| L | 0 Interest Income to Senior Citizen(Considered as deduction u/s 80TTB upto Rs.50000) | | 0.00 |
|---|--|---|------|
| | 0 | Interest on Deposits in Savings Account (Considered as deduction u/s 80TTA upto Rs.10000) | 0.00 |
| | 0 | Pension | 0.00 |
| ſ | 0 | Others | 0.00 |

Dependant Details:

| Dependant Name | Relationship | Age |
|----------------|--------------|-----|
| Yashwanth PC | Self | 24 |

Declaration:

- 1. I hereby declare that I have read and understood the guidelines provided in 'Proofs Option Document' and that, all information, documents provided above is true and correct in all respects.
- 2. 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.

| Date: | |
|--------|-------------------------|
| Place: | Signature of Employee * |

^{*} 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 | M Riyaz | | 102,prafulla nivas,2nd floor,2nd cross,peekayam layout,hosapalya,hsr sector- 6,bengaluru-560068 | 61580.65 | |

| Payroll Deduction | | |
|---------------------------|----------|--|
| Particulars | Amount | |
| Provident Fund | 22258.00 | |
| Payroll Deduction - Total | 22258.00 | |

HRA FUTURE RENT DECLARATION

| STANDARD CHARTERED GLOBAL BUSINESS SERVICES PRIVATE LIMITED | | | |
|---|--------------------------|--|--|
| EMP ID | 1610903 | | |
| EMP NAME | Yashwanth PC | | |
| RENT AMOUNT PER MONTH | 8300 | | |
| FOR THE PERIOD | 01-01-2020 TO 31-03-2020 | | |
| LANDLOARD NAME | M Riyaz | | |
| LANDLOARD PAN | | | |

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

Employee Declaration

| Date | : | |
|-------|---|-------------------------|
| place | : | Signature of Employee * |

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

Name and address of the employee Yashwanth PC
 Permanent Account Number of the employee DCOPP2513N
 Financial year 2019-2020

| | L | (5.) | Evidence / |
|---------|---|-------------------|---------------------------------|
| SI. No. | Nature of claim | Amount(Rs.) | particulars |
| L | 2 | 3 | 4 |
| | House Rent Allowance | | |
| | (i) Rent paid to the landlord : Rs.61581 | | |
| | (i) PROPERTY NO: 1 | | |
| | (ii) Name of the landlord : M Riyaz | D- 61501 | House Rent |
| 1 | (iii) Address of the landlord: 102,prafulla nivas,2nd floor,2nd cross,peekayam layout,hosapalya,hsr sector-6,bengaluru-560068 | Rs.61581 | Receipts |
| | (iv) Permanent Account Number of the landlord: | | |
| | (v) Annual Rent: 61580.65 | | |
| | | | |
| 2 | Leave travel concessions or assistance | Rs.0 | Travel |
| | | 1.5.0 | Receipts/Tickets |
| | Deduction of interest on borrowing: | | |
| | (i)Interest payable/paid to the lender | | |
| | (ii) Name of the lender | | Provisional Certificate from |
| 3 | (iii) Address of the lender | Rs.0.0 | Bank/Financial |
| | (iv)Permanent Account Number of the lender | | Institution/Lende |
| | (a) Financial Institutions (b) Employer | | |
| | (c) Others | | |
| | Deduction under Chapter VI-A | | |
| | (A) Section 80C,80CCC and 80CCD | | |
| 4 | (i) Section 80C | Do 0.0 | Photocopy of th |
| 4 | (ii) Section 80CCC : | Rs. 0.0 | investment proofs |
| | (iii) Section 80CCD : | | |
| | (B) Other sections (e.g. 80E, 80G, 80TTA, etc.) under Chapter VI-A. | | |
| | Verification | 1 | |
| | I, Yashwanth PC ,son/daughter of null do hereby certify that the information given above is complet | te and correct | |
| | Place: RMZ Ecoworld 8A,2/F | | |
| | | | |
| | | | |
| | Date: 03/01/2020 | | |
| | | | |
| | | (Signature of the | e employee) |
| | Designation :Sr Developer | Full Name:Yashv | |

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.