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 :

2 Permanent account number :

3 Financial year : 2025 - 26

Details of claims and evidence thereof			
Sl.No.	**Nature of claim**	**Amount (Rs.)**	**Evidence /Particulars**
(1)	**(2)**	**(3)**	**(4)**
1.	**House Rent Allowance:** **(i) Rent Paid to the Landlord:** **(ii) Name of the landlord:** **(iii) Address of the landlord:** **(iv) PAN of the landlord:** **Note: Permanent Account Number shall be furnished if the aggregate rent paid during the previous year exceeds onelakh rupees**		
2.	**Leave travel concessions or assistance**		
3.	**Deduction of interest on borrowing** **(i) Interest payable/paid to the lender** **(ii) Name of the lender** **(iii) Address of the lender** **(iv) PAN of the lender (Financial Institution/Employer/Others)-If available**		
4.	**Deduction under Chapter VI-A** **(B) Other sections (e.g. 80E, 80G, 80TTA, etc.) under Chapter VI-A,** **Housing Loan Interest** **Mediclaim Policies** **Medical treatment of dependent** **Medical treatment of Self** **Interest paid for Educational Loan** **Donation to various charitable funds** **Deduction for person with disability** **Interest paid for Electric Vehicle Loan** **Interest income for SB, Fixed deposit, ...** **Remaining Contribution to NPS** **NPS - Employer's Contribution**		

	(A) Section 80C,80CCC and 80CCD **(i) Section 80C** **a) LIC, PLI etc** **b) Purchase of NSC VIII issue** **c) Contribution to GPF** **d) Contribution to SLI, GIS, FBS, GPAIS** **e) Term deposit with Scheduled Bank** **f) Mutual Fund or UTI** **g) Tution fees** **h) Housing Loan Repayment (Principal)** **i) Contribution to PPF** **j) Five year Time Deposit in Post Office** **k)** **l)** **m)** **n)** **(ii) 80CCC Contribution to Pension Fund** **(iii) Contribution to NPS**		

Verification

I, ... , son/daughter of ..... do hereby certify that the information given above is complete and correct.

Place:

Date: **Signature:**