

Customer Copy

punjab national bank_

Date :

INDO NEPAL REMITTANCE

BENEFICIARY'S DETAILS

Account No.																
*Name																
*Address																
*Mode of Payment	Everest Bank Account	Cash Payment	Other Bank	Name of Bank & Branch												
*Beneficiary ID Type											*ID No					
Phone/Cell											Email					

REMITTER'S DETAILS

PNB Account No.																					
*Name																					
*Address																					
*Phone/Cell											PAN No										
*Remitter ID Type											*ID No										

Cash Deposit:

Denomination	Rs.	Ps
1000 *		
500 *		
100 *		
50 *		
20 *		
10 *		
5 *		
Coins *		
Total		

Cheque Deposit:

Chq No	Date of Chq	Rs.	Ps
Name of Bank		Branch	

<u>AMOUNT TO BE REMITTED</u>											
Amount								-			
Commission								-			
Total amount								.			

Amount (in words): Rs. -----

.....
Cashier

.....
Authorised Officer

UIN No	
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P.S. If remittance is for any bank other than EBL, Rs.100/- additional charge will be levied

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INDO NEPAL REMITTANCE

(*fields are Mandatory)

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Cash Deposit:

Denomination	Rs.	Ps
1000 *		
500 *		
100 *		
50 *		
20 *		
10 *		
5 *		
Coins *		
Total		

Amount (in words): Rs. -----

Signature :

.....

Remitter's ID verified from original

UIN No	
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Authorised Officer