STATE BANK OF INDIA, IT-BHU, BRANCH

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National Electronic Fund Transfer

(To be filled in by the Applicant in Block Letters)

<u>Details of Applicant (Remitter)</u> - BY N.E.F.T on ____.__.2022

(1) Account Name :

(2) Account No. & Type of Account:
(3) Remitter's Name: Registrar
(4) Phone No. or Mobile No.: +91 -

Details of Beneficiary

(1) Centre :

(2) Bank : UNION BANK OF INDIA

(3) Branch : RATHYATRA CROSSING, VARANASI

(4) Beneficiary Name: ENTERPRISES(5) Account No.: 601010036824

(6) Type of Account : CURRENT ACCOUNT

IFSC OF BENEFICIARY	U	В	Ι	N	0	5	6	0	6	7
BANK BRANCH										

(7)

Amount to be remitted: **Rs.**Bank Charges: Nil

Total Amount: Rs.

Remit the amount as per above details, by debiting my / our account for the amount of remittance plus your charges.

Authorized Signatory

FOR BANK'S USE ONLY

Rupees

Debited Applicant's Date of Transfer

A/c:

Remittance No. (UTR)

:

Authorised Signatory

CONDITIONS OF TRANSFER

- Remitting Bank shall not be liable for any loss of damage arising or resulting from delay in transmission delivery or non-delivery of Electronic message or any mistake, omission, or error in transmission or delivery thereof or in deciphering-the message from any cause whatsoever or from its misinterpretation received or the action of the destination Bank or any act beyond our control.
- 1. All payment instructions should be checked carefully by the remitter.
- 2. Message received after cut-off time will be sent on the next working day.

STATE BANK OF INDIA, IT-BHU, BRANCH

D	ate	•

National Electronic Fund Transfer

(To be filled in by the Applicant in Block Letters)

Details of Applicant (Remitter) - BY N.E.F.T on ____. __.2020

(1) Account Name

(2) Account No. & Type of Account:

(3) Remitter's Name : Registrar

(4) Phone No. or Mobile No. : + 91 - 9621234425

Details of Beneficiary

(1) Centre :

(2) Bank : Canara Bank

(3) Branch : IIT Indore, Simrol
(4) Beneficiary Name : Ram Bilas Pachori
(5) Account No. : 6223101000378

(6) Type of Account:

IFSC OF BENEFICIARY	С	N	R	В	0	0	0	6	2	2	3
BANK BRANCH											

(7

Amount to be remitted: **Rs.**Bank Charges: Nil

Total Amount: Rs.

Remit the amount as per above details, by debiting my / our account for the amount of remittance plus your charges.

Authorized Signatory

FOR BANK'S USE ONLY

Rupees

Debited Applicant's Authorised Signatory

A/c:

Remittance No. (UTR)

:

CONDITIONS OF TRANSFER

- 3. Remitting Bank shall not be liable for any loss of damage arising or resulting from delay in transmission delivery or non-delivery of Electronic message or any mistake, omission, or error in transmission or delivery thereof or in deciphering-the message from any cause whatsoever or from its misinterpretation received or the action of the destination Bank or any act beyond our control.
- 4. All payment instructions should be checked carefully by the remitter.
- 5. Message received after cut-off time will be sent on the next working day.