



STAFF SELECTION COMMISSION CHALLAN FOR FEE DEPOSIT		
Combined Graduate Level Examination, 2020		
SSC	<b>BANK COPY</b> (To be retained by SBI branch) DEPOSIT IN ANY BRANCH OF SBI IN <b>CASH</b> ONLY	
SBI CBS SCREEN NUMBER: 8888		FEE TYPE : 324
CHALLAN REFERENCE NUMBER <i>(To be entered in Reg. ID/Ref. No held in screen-8888 in CBS)</i>		20012550002790884
APPLICANT'S NAME		VISHWAKARMA AMITKUMAR DINESHKUMAR
CHALLAN GENERATION DATE		07/01/2021
CHALLAN EXPIRY DATE		06/02/2021
<b>Amount: (In figures):Rs.100 (In words):Rs. One Hundred Only</b> <i>*(No Bank Charges to be taken from depositor separately)</i>		
Signature of Depositor: _____		
*****Details below to be filled in by the bank*****		
SBI Branch Code: _____ DATE OF RECEIPT: __/__/____(dd/mm/yyyy)		
SBI JOURNAL NO.  <i>(To be written in legible handwriting)</i>	Signature of Bank's Official with Seal	
Instructions for SBI Branches:  1. Branches should not refuse to accept the Challan. 2. Please note to write the <b>Journal Number</b> in all the challans. 3. Please check the Name of the Candidate positively after entering Registration ID. 4. No separate charges/commission to be charged from the depositor. 5. In case of any problem, Branch should immediately contact Host Branch(00691) on these number. 011-23374038, 011-23407664 & email - customercare.00691@sbi.co.in		
IMPORTANT INSTRUCTIONS TO CANDIDATES  1. Challan can be deposited after minimum Three hours of generation of challan during Bank hours 2. Please note the <b>Last Date for receipt of CASH payment by SBI is: 06/02/2021</b>		

STAFF SELECTION COMMISSION CHALLAN FOR FEE DEPOSIT		
Combined Graduate Level Examination, 2020		
SSC	<b>CANDIDATE COPY</b> (To be retained by the Candidate) DEPOSIT IN ANY BRANCH OF SBI IN <b>CASH</b> ONLY	
SBI CBS SCREEN NUMBER: 8888		FEE TYPE : 324
CHALLAN REFERENCE NUMBER <i>(To be entered in Reg. ID/Ref. No held in screen-8888 in CBS)</i>		20012550002790884
APPLICANT'S NAME		VISHWAKARMA AMITKUMAR DINESHKUMAR
CHALLAN GENERATION DATE		07/01/2021
CHALLAN EXPIRY DATE		06/02/2021
<b>Amount: (In figures):Rs.100 (In words):Rs. One Hundred Only</b> <i>*(No Bank Charges to be taken from depositor separately)</i>		
Signature of Depositor: _____		
*****Details below to be filled in by the bank*****		
SBI Branch Code: _____ DATE OF RECEIPT: __/__/____(dd/mm/yyyy)		
SBI JOURNAL NO.  <i>(To be written in legible handwriting)</i>	Signature of Bank's Official with Seal	
Instructions for SBI Branches:  1. Branches should not refuse to accept the Challan. 2. Please note to write the <b>Journal Number</b> in all the challans. 3. Please check the Name of the Candidate positively after entering Registration ID. 4. No separate charges/commission to be charged from the depositor. 5. In case of any problem, Branch should immediately contact Host Branch(00691) on these number. 011-23374038, 011-23407664 & email - customercare.00691@sbi.co.in		
IMPORTANT INSTRUCTIONS TO CANDIDATES  1. Challan can be deposited after minimum Three hours of generation of challan during Bank hours 2. Please note the <b>Last Date for receipt of CASH payment by SBI is: 06/02/2021</b>		