

SPECIALIZED DEPOSIT SLIP

On Behalf of Bureau of Emigrant & Overseas
Employment

Depositor Copy

Deposit Slip No.

-297466

EMIGRANT THROUGH OVERSEAS EMPLOYMENT PROMOTOR (OEP)

Collection Branch Name	Branch Code	Date	0	6	-	0	3	-	2	0	2	5
------------------------	-------------	------	---	---	---	---	---	---	---	---	---	---

Emigrant Information

Emigrant Name: Carissa Mathis	CNIC	6	5																
Telephone (mobile)	+1 (499) 827-7021																		

Particular of Payments _ CREDIT TO MADE THROUGH TRANSACTION CODE "ZBOEOP" Amount in Rs.

Payment made on behalf of Director General Bureau of Emigration & Overseas Employment	OPF Welfare Fund	4000 /-
	State Life Insurance Premium	2500 /-
	OEC Emigrant Promotion FEE	Rs 200/-

Amount in Words: Six Thousand Seven Hundred Only **Total** **6700 /-**

Received By	Authorized By	Depositor's Signature
-------------	---------------	-----------------------

Cashier's Stamp & Signature	Authorized Officer's Signature	Name: Muhammad Atif Shehzad Contact Number: 03244257417 Signature: _____
-----------------------------	--------------------------------	--

Note: for branch only

- Only cash is acceptable

- Separate slip for every individual

SPECIALIZED DEPOSIT SLIP

On Behalf of Bureau of Emigrant & Overseas
Employment

BE&OE Copy

Deposit Slip No.

-297466

EMIGRANT THROUGH OVERSEAS EMPLOYMENT PROMOTOR (OEP)

Collection Branch Name	Branch Code	Date	0	6	-	0	3	-	2	0	2	5
------------------------	-------------	------	---	---	---	---	---	---	---	---	---	---

Emigrant Information

Emigrant Name: Carissa Mathis	CNIC	6	5																
Telephone (mobile)	+1 (499) 827-7021																		

Particular of Payments _ CREDIT TO MADE THROUGH TRANSACTION CODE "ZBOEOP" Amount in Rs.

Payment made on behalf of Director General Bureau of Emigration & Overseas Employment	OPF Welfare Fund	4000 /-
	State Life Insurance Premium	2500 /-
	OEC Emigrant Promotion FEE	Rs 200/-

Amount in Words:

Received By	Authorized By	Depositor Signature
-------------	---------------	---------------------

Cashier's Stamp & Signature	Authorized Officer's Signature	Muhammad Atif Shehzad Contact Number: 03244257417 Signature: _____
-----------------------------	--------------------------------	--

Note: for branch only

- Only cash is acceptable

- Separate slip for every individual

SPECIALIZED DEPOSIT SLIP

On Behalf of Bureau of Emigrant & Overseas
Employment

Bank Copy

Deposit Slip No.

-297466

EMIGRANT THROUGH OVERSEAS EMPLOYMENT PROMOTOR (OEP)

Collection Branch Name	Branch Code	Date	0	6	-	0	3	-	2	0	2	5	
Emigrant Information													
Emigrant Name: Carissa Mathis	CNIC	6	5										
Telephone (mobile)	+1 (499) 827-7021												
Particular of Payments _ CREDIT TO MADE THROUGH TRANSACTION CODE "ZBOEOP"												Amount in Rs.	
Payment made on behalf of Director General Bureau of Emigration & Overseas Employment		OPF Welfare Fund									4000 /-		
		State Life Insurance Premium									2500 /-		
		OEC Emigrant Promotion FEE									Rs 200/-		
Amount in Words: Six Thousand Seven Hundred Only												Total	6700 /-
Received By		Authorized By				Depositor's Signature							
Cashier's Stamp & Signature <i>Note: for branch only</i>		Authorized Officer's Signature <i>- Only cash is acceptable</i>				Name: Muhammad Atif Shehzad Contact Number: 03244257417 Signature: _____							
						<i>- Separate slip for every individual</i>							

SPECIALIZED DEPOSIT SLIP

On Behalf of Bureau of Emigrant & Overseas
Employment

Bank Copy

Deposit Slip No.

-297466

EMIGRANT THROUGH OVERSEAS EMPLOYMENT PROMOTOR (OEP)

Collection Branch Name	Branch Code	Date	0	6	-	0	3	-	2	0	2	5	
Emigrant Information													
Emigrant Name: Carissa Mathis	CNIC	6	5										
Telephone (mobile)	+1 (499) 827-7021												
Particular of Payments _ CREDIT TO MADE THROUGH TRANSACTION CODE "ZBOEOP"												Amount in Rs.	
Payment made on behalf of Director General Bureau of Emigration & Overseas Employment		OPF Welfare Fund									4000 /-		
		State Life Insurance Premium									2500 /-		
		OEC Emigrant Promotion FEE									Rs 200/-		
Amount in Words: Six Thousand Seven Hundred Only												Total	6700 /-
Received By		Authorized By				Depositor's Signature							
Cashier's Stamp & Signature <i>Note: for branch only</i>		Authorized Officer's Signature <i>- Only cash is acceptable</i>				Name: Muhammad Atif Shehzad Contact Number: 03244257417 Signature: _____							
						<i>- Separate slip for every individual</i>							