

SPECIALIZED DEPOSIT SLIP

On Behalf of Bureau of Emigrant & Overseas Employment Depositor Copy

Deposit Slip No.

-297466

						-						- /-						•			
		DUGH OVERSEAS EMPLOYME							/10	TO	R (C	DEP) 	_	_	_	_				
Collection Branch Name			Branch Code					Date	0	6	_	0	3	-	2	0	2	5			
Emigrant Information				1		_			_	_	_			_	_	_	_	_			
Emigrant Name: Carissa Mathis				CNIC	6	5															
Telephone (mobile)	7021													_			_				
Particular of Payment	GH TR	ANSAC	TION	N CODE "ZBOEOP"							,	Amount in Rs									
	on behalf of						OPF W	4000 /-													
B	eneral						e Life In	2500 /-													
	verseas Empl		ient OEC Emigra						migrant Promotion FEE							Rs 200					
Amount in Words: Six		d Only						6700 /-													
Received	A	Authorized By						Depositor's Signature													
									Name: Muhammad Atif Shehzad Contact Number: 03244257417												
			Contact Number: 05244257417																		
Cashier's Stamp 8		Authoriz			Signature:																
Note: for branch only – Only cash is acceptable								– Separate slip for every individual													
NBP National Basis of Papasan							_							DT 9	OF	Con	.,	_			
SPECIALIZED DEPOSIT On Behalf of Bureau of Emigrant & Ov Employment								<u></u>								&OE Copy					
								ciseas	eposit Slip No.												
								-297466													
FN	/IIGRANT THI	ROUGH OV	/FRSF	-ΔS FN	ЛΡΙ	ΟΥ	MF	NT PR	ON	۱O.	τοι	R (()FP)				1			
Collection Branch Nan		Branch Code						0	6		0	3	, -	2	То	2	T 5				
Emigrant Information							Date								10		Ľ				
				CNIC	6	5	Г		Г						Г	Т	Г	Г			
Emigrant Name: Carissa Mathis Telephone (mobile) +1 (499) 827-7021				Civic		٦					<u> </u>							Ш			
Particular of Payment			GH TR	ANSAC	TION	I CC	DE "	'ZBOEO	P"		_				Am	noun	t in	ES.			
Payment made on behalf of								OPF Welfare Fund 4000 /-													
			_	State	e Life In	sura	nce	Pre	miu	ım		_		500							
Bureau of Emigration & Overseas Employment							OEC Emigrant Promotion FEE R							Rs 2	_						
Amount in Words:																		_			
Received	А	Authorized By					Depositor Signature														
								Muhammad Atif Shehzad													
								Contact Number: 03244257417													
Cashier's Stamp & Signature Authorized Officer's Signatu								Signature:													
Note: for branch only — Only cash is acce					_			_	Sep	ara	te si	ip fo	or ev	ery i	ndiv	/idu	al	_			



Note: for branch only

SPECIALIZED DEPOSIT SLIP

On Behalf of Bureau of Emigrant & Overseas Employment Bank Copy

Deposit Slip No.

-297466

– Separate slip for every individual

EMIGRANT T	HROUGH (OVERS	EAS EN	ИPL	.OY	ME	NT F	RO	мо	то	R (0	DEP)				•			
Collection Branch Name		Branch Code					0	$\overline{}$	T.	Ī	3	-	2	0	2	5				
Emigrant Information								1		Ш						L				
Emigrant Name: Carissa M		CNIC	6	5			Т	Τ						Π						
Telephone (mobile) +1 (499) 827-7021						<u> </u>						<u> </u>								
Particular of Payments _ CREDIT To	OUGH TE	RANSAC	TION	N CODE "ZBOEOP"								Amount in Rs.								
Payment mad	of						OPF Welfare Fund							4000 /-						
Director		Sta					te Life Insurance Premium							2500 /-						
Bureau of Emigration 8	nployme	nt	OEC Emigrant					Pror	noti	on F	Rs 200/									
Amount in Words: Six Thousand Se	Only		•							То	tal	6700 /-								
Received By		Author	rized By		Deposito						or's Signature									
								Name: Muhammad Atif Shehzad												
								Contact Number:								03244257417				
Cashier's Stamp & Signature	orized Of	ficer's S	ignat	ature Signature:						re:										
Note: for branch only – Only cash is acceptable							-Separate slip for every individual													
SPECIALIZED DEPOSIT On Behalf of Bureau of Emigrant & Or Employment								·												
											_ ,			7466			•			
EMIGRANT T	HROUGH			MPL	OY.	ME	NT F	_	_	TO	Ť	_) 	_	_	_	_			
Collection Branch Name			Branch Code					0	6	<u> </u>	0	3	-	2	0	2	5			
Emigrant Information									_	_				_	_		_			
Emigrant Name: Carissa Mathis			CNIC	6	5															
Telephone (mobile) +1 (499) 82					Ļ									_						
Particular of Payments _ CREDIT T	N C	ODE	, missing ministration																	
Payment mad	of						OPF Welfare Fund						4000 /-							
Director				State Life Insurance Prem							20007									
Bureau of Emigration & Overseas Employment						OEC Emigrant Promotion FEE Rs 20														
Amount in Words: Six Thousand Se										_	tal				00	<u>'-</u>				
Received By		Author	rized By			-	Depositor's Signature													
															Shehzad 1257417					
Cashier's Stamp & Signature Authorized Officer's Signat								Signa	ature	e:										

- Only cash is acceptable