



National Bank of Pakistan  
نیشنل بینک آف پاکستان

## SPECIALIZED DEPOSIT SLIP

On Behalf of Bureau of Emigrant & Overseas  
Employment

Bank Copy

Deposit Slip No.

### EMIGRANT THROUGH OVERSEAS EMPLOYMENT PROMOTOR (OEP)

Collection Branch Name	Branch Code	Date			-			-			
Emigrant Information											
Emigrant Name:	CNIC										
Telephone (Mobile)						Telephone (Residence)					
Particular of Payments _ CREDIT TO MADE THROUGH TRANSACTION CODE "ZBOEOP"											Amount in Rs.
Payment made on behalf of <b>Director General</b> <b>Bureau of Emigration &amp; Overseas Employment</b>						OPF Welfare Fund			Rs. 2,000/-		
						State Life Insurance Premium			Rs. 2,500/-		
						OEC Emigrant Promotion FEE			Rs. 200/-		
Amount in Words: Four Tousand Seven Hundred Only										Total	Rs. 4,700/-
Received By		Authorized By				Depositor's Signature					
Cashier's Stamp & Signature		Authorized Officer's Signature				Name: _____					
						Contact Number: _____					
						Signature: _____					

*Note: for branch only*

*- Only cash is acceptable*

*- Separate slip for every individual*



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Depositor Copy

Deposit Slip No.

### EMIGRANT THROUGH OVERSEAS EMPLOYMENT PROMOTOR (OEP)

Collection Branch Name	Branch Code	Date			-			-			
Emigrant Information											
Emigrant Name:	CNIC										
Telephone (Mobile)						Telephone (Residence)					
Particular of Payments _ CREDIT TO MADE THROUGH TRANSACTION CODE "ZBOEOP"											Amount in Rs.
Payment made on behalf of <b>Director General</b> <b>Bureau of Emigration &amp; Overseas Employment</b>						OPF Welfare Fund			Rs. 2,000/-		
						State Life Insurance Premium			Rs. 2,500/-		
						OEC Emigrant Promotion FEE			Rs. 200/-		
Amount in Words: Four Tousand Seven Hundred Only										Total	Rs. 4,700/-
Cashier's Stamp & Signature		Authorized Officer's Signature				Name: _____					
						Contact Number: _____					
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On Behalf of Bureau of Emigrant & Overseas  
Employment

OPF Copy

Deposit Slip No.

### EMIGRANT THROUGH OVERSEAS EMPLOYMENT PROMOTOR (OEP)

Collection Branch Name	Branch Code	Date			-			-			
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#### Emigrant Information

Emigrant Name:	CNIC													
Telephone (Mobile)										Telephone (Residence)				

#### Particular of Payments \_ CREDIT TO MADE THROUGH TRANSACTION CODE "ZBOEOP"

Amount in Rs.

Payment made on behalf of	OPF Welfare Fund	Rs. 2,000/-
Director General	State Life Insurance Premium	Rs. 2,500/-
Bureau of Emigration & Overseas Employment	OEC Emigrant Promotion FEE	Rs. 200/-

Amount in Words: Four Tousand Seven Hundred Only

**Total** **Rs. 4,700/-**

Cashier's Stamp & Signature	Authorized Officer's Signature	Name: _____ Contact Number: _____ Signature: _____
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Collection Branch Name	Branch Code	Date			-			-			
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Amount in Rs.

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Director General	State Life Insurance Premium	Rs. 2,500/-
Bureau of Emigration & Overseas Employment	OEC Emigrant Promotion FEE	Rs. 200/-

Amount in Words: Four Tousand Seven Hundred Only

**Total** **Rs. 4,700/-**

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