



Depositor Copy

Pre Acknowledgement Payment(PAP) Form for Payment through any SBI Branch

Date: 03-12-2020

Beneficiary/Remittance Details		
State Bank MOPS Reference No.	CPAALKWVR9	
Beneficiary:	All India Sainik School Entrance Exam	
Merchant Reference No:	21181015969601401	
	Rs	P
Collection Amount	550	00
Comission	0	00
Total (Five Hundred And Fifty Rupees Only)	550	00
Details of Cash / Cheques		
	Rs	p
Total Rs		

Instructions for Depositor: This is not an e-receipt.

(To be Filled in by the Bank)

Journal No:

Branch Name: _____

Branch Code: Deposit Date:

Branch Stamp

Authorised Signatory



Branch Copy

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Mode of Payment (Choose Either Cash / Cheque)

Cash ☐

Cash Notes	Amount			
	Rs			P
*2000				
*500				
*200				
*100				
*50				
*20				
*10				
Coins				
Total Rs				

Cheque ☐

Cheque No: _____

Cheque Date: _____

Drawee Bank & Branch: State Bank of India _____

Branch : _____

Signature of the Depositor

Space for Bank use

Branch Stamp