

Department of Posts eMO Form

n	(Name of Booking Post Of	(Name of Booking Post Office)
Remitter Address	Address Rakhel Dash	lintend to pay Rs
ddress 1	ddress 1 Shikshyashree Lane	figure)(in words)
ddress 2	Address 2 Atharanala, Kumbharapada	Name Senior Doctmaster
Address 3		, v
District	Puri	Address 2 Kolkata GPO
state	Odisha	Address 3
IN Code	752002 752002	District
	Ph - 7008950970	State
		PIN Code 700001
Sive the r	Sive the relevant option for Message Code:	

(Name and signature of Remitter)

Message Code

FOR OFFICE USE ONLY

(Signature) CPM/SPM/DPM/APM/SPM



Department of Posts eMO Form

*	(Name of Booking Post Of	(Name of Booking Post Office)
Remitter Address	ddress	Lintend to pay Rs 300
lame	Rakhel Dash	figure) Rupees three hundred only (in words)
ddress 1	ddress 1 Shikshyashree Lane	through of the following payer:
ddress 2	ddress 2 Atharanala, Kumbharapada	Name Conjor Doctorates
ddress 3		Address 4 Dhills Discon
District Puri	Puri	Address Filliatelic Bureau
state	Odisha	Address 2 New Deini GPO
ode	752002	Address 3
	Ph - 7008950970	State
		PIN Code 110001

(Name and signature of Remitter)

Give the relevant option for Message Code: IN-SA MEET AND CIRCKET SPL COVER 5 EACH

Message Code

FOR OFFICE USE ONLY

Amount of Remittance	
Commission	(Space for pasting eMO receipt)
Total	
Signature of MO PA	Authorized for remittance
	Oblong Stamp

(Signature) CPM/SPM/DPM/APM/SPM



Department of Posts eMO Form

n	(Name of Booking Post Of	(Name of Booking Post Office)
Remitter Address	Address	Lintend to pay Rs 200
lame	Rakhel Dash	figure) Rupees two hundred only
ddress 1	ddress 1 Shikshyashree Lane	through aMO to the following payee:
ddress 2	ddress 2 Atharanala, Kumbharapada	Name Cenior Destructor
ddress 3		Advected Deligion Direction
District Puri	Puri	Address rimatencom eau
state	Odisha	Audiess Z ightaia
IN Code	IN Code 752002	Address 5
	Ph - 7008950970	State
		PIN Code 496227

a a	(Name and signature of Remitter)		(Space for pasting eMO receipt)
		FOR OFFICE USE ONLY	
Message Code			Amount of Remittance

Give the relevant option for Message Code: PICTORIAL CANC ON YELLOW AND PICTURE POSTCARD

Commission Total		(Space for pasting eMO receipt)	asting eMO receipt)
Signature of MO PA	*		Authorized for remittance Oblong Stamp

(Signature) CPM/SPM/DPM/APM/SPM