

Bank Challan (Bank Copy)

Account No.- 34924933479 Beneficiary Name Longowal Polytechnic & Pharmacy <u> College. Derabassi - Mohali (Pb)</u>

Course*:

Name of Student/	me of Student/ Applicant*:				
Application No/ (Father's Name*:	Challan No	Application Father's Nam			
Ref. No. /Refund Mobile No.*:	Account N	Ref. No. /Re Mobile No.*:			
Amount of Fee: (in figure)		Amount of Fe			
Bank Charges:		Bank Charges Total Amount			
Total Amount:	Total Amount:				
(in words)	(in words)				
(*Mandatory fields Depositor Signat	(*Mandatory f				
Detail of Cash:			Detail of Ca		
1000x			1000x		
500x			500x		
100x			100x		
50x Total			50x Total		
(To be fille	ed up by t	he bank)	(To be		
Branch Name _	Branch Name				
Branch Code _	Branch Code				
Journal No.	Journal No.				
Deposit Date _	Deposit Date				
Stamp	of the	Bank	Sta		

Note: Bank copy to be retained by the bank. Institute copy & Candidate Copy to be handed over to the candidate.

For Further ENQUIRY

Branch Name: Derabassi, Distt - Mohali Branch Code: 10739 Phone No: 01762-281247



Bank Challan (Institute Copy)

No.- 34924933479 Account

Course*:		
Name of Studen	t/ Applican	t*:
Application No/	Challan No	
Father's Name*:		
Ref. No. /Refur	.d Account N	o. /
Mobile No.*:		
Amount of Fee: (in figure)		
Bank Charges:		
Total Amount:		
(in words)		
(*Mandatory field	ds to be feed	ed by branches)
Depositor Sign	nature:	
Detail of Cash	:	
1000x		
500x		
100x		
50x		
Total		

Branch Code	
Journal No.	
Deposit Date	

(To be filled up by the bank)

Stamp of the Bank

Note: Bank copy to be retained by the bank. Institute copy & Candidate Copy to be handed over to the candidate.

For Further ENQUIRY

Branch Name: Derabassi, Distt - Mohali Branch Code: 10739

Phone No: 01762-281247



Bank Challan (Candidate Copy)

Account No.- 34924933479 Beneficiary Name
Longowal Polytechnic & Pharmacy
Longowal Polytechnic & Pharmacy College.Derabassi - Mohali (Pb) College.Derabassi - Mohali (Pb)

Course*:	Γ				
Name of Studen	t/ Ar	plica	nt*:		
Application No		allan	No.		
Father's Name*	. [
Ref. No. /Refu	nd A	ccount	No.	/	
Mobile No.*:					
Amount of Fee:					
(in figure)	_				
Bank Charges:					
Total Amount:					
(in words)	_				
(*Mandatory fie	lds t	o be f	eeded	by bran	ches
Depositor Sig	natur	e:			
Detail of Cas	h·				
1000x					
500x					
100x					
50x					
Total					
(To be f	ille:	lunh	., +h	hank\	
(10 be 1		. աբ Ե	A CITE	, Dank)	

Stamp of the Bank

Note: Bank copy to be retained by the bank. Institute copy & Candidate Copy to be handed over to the candidate.

For Further ENQUIRY

Branch Name: Derabassi, Distt - Mohali Branch Code: 10739

Phone No: 01762-281247

Branch Name

Branch Code

Journal No.

Deposit Date