

The Sarvodaya Co-Op. Bank Ltd. Mumbai

TO THE MANAGER															IFSC CODE				
_____ BRANCH															DATE				
Dear Sir / Madam, Please remit funds as per details given below and I / We authorise you to debit the amount along with your charges to my/our account with you. We agree to abide by the terms and conditions given overleaf.																			
DETAILS OF THE APPLICANT										DETAILS OF THE BENEFICIARY									
NAME										NAME									
ACCOUNT TYPE										CITY									
ACCOUNT NUMBER										BANK NAME									
Email. ID										BRANCH									
Mobile No										IFSC CODE									
PAN NO																			
AMOUNT OF REMITTANCE Rs.										ACCOUNT TYPE									
BANK CHARGES Rs.										ACCOUNT NUMBER									
TOTAL AMOUNT Rs.																			
Rupees (In Word) _____																			
APPLICANT'S SIGNATURE																			

FOR OFFICE USE ONLY (REMITTING BRANCH)	RTGS / NEFT CENTRE
1. Applicant's signature verified and amount debited to the account & Charges recovered.	Transaction entered as per details of beneficiary given above
2. All the operational guidelines relating to RTGS/NEFT have been observed without deviation.	
	SIGNATURE OF MAKER
	TRANSACTION AUTHORISED UTR NO
	Remitted through RTGS as per details of beneficiary given above
	
	SIGNATURE OF CHECKER (1)
	
SIGNATURE OF BRANCH MANAGER	SIGNATURE OF CHECKER (2)

ACKNOWLEDGEMENT(TO BE FILLED IN BY THE APPLICANT)																			
For funds transfer under R T G S as per details given below																			
RECEIVED FROM										AMOUNT Rs.									
ACCOUNT NUMBER										BENEFICIARY'S NAME									
BANK					BRANCH					CITY									
IFSC/CO					BENEFICIARY'S ACCOUNT NO														
DATE					TIME					FOR THE SARVODAYA CO-OP BANK LTD, MUMBAI									
					AM / P M					AUTHORISED SIGNATORY									