

Customer Copy

punjab national bank_

Date :

INDO NEPAL REMITTANCE**BENEFICIARY'S DETAILS**

Account No.																			
*Name																			
*Address																			
*Mode of Payment	Everest Bank Account	Cash Payment	Other Bank	Name of Bank & Branch															
*Beneficiary ID Type														*ID No					
Phone/Cell																Email			

REMITTER'S DETAILS

PNB Account No.																	
*Name																	
*Address																	
*Phone/Cell																	
*Remitter ID Type														*ID No			

Cash Deposit:

Denomination	Rs.	Ps
1000 *		
500 *		
100 *		
50 *		
20 *		
10 *		
5 *		
Coins *		
Total		

Cheque Deposit:

Chq No	Date of Chq	Rs.	Ps
Name of Bank		Branch	

<u>AMOUNT TO BE REMITTED</u>										
Amount								-		
Commission								-		
Total amount								.		

Amount (in words): Rs. -----

Cashier

Authorised Officer

UIN No

P.S. If remittance is for any bank other than EBL, Rs.100/- additional charge will be levied

Bank Copy

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Date :

INDO NEPAL REMITTANCE

(*fields are Mandatory)

BENEFICIARY'S DETAILS

Account No.																			
*Name																			
*Address																			
*Mode of Payment	Everest Bank Account	Cash Payment	Other Bank	Name of Bank & Branch															
*Beneficiary ID Type														*ID No					
Phone/Cell																Email			

REMITTER'S DETAILS

PNB Account No.																	
*Name																	
*Address																	
*Phone/Cell																	
*Remitter ID Type														*ID No			

Cash Deposit:

Denomination	Rs.	Ps
1000 *		
500 *		
100 *		
50 *		
20 *		
10 *		
5 *		
Coins *		
Total		

Amount (in words): Rs. -----

Signature :

Cheque Deposit:

Chq No	Date of Chq	Rs.	Ps
Name of Bank		Branch	

<u>AMOUNT TO BE REMITTED</u>										
Amount								-		
Commission								-		
Total amount								.		

Remitter's ID verified from original

UIN No

Authorised Officer