

punjab national bank _____

Date: _____

punjab national bank _____

Date: _____

INDO NEPAL REMITTANCE

INDO NEPAL REMITTANCE

(*Fields are Mandatory)

BENEFICIARY'S DETAILS

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		

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

REMITTER'S DETAILS

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

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

Cash Deposit:

Cheque Deposit:

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

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

AMOUNT TO BE REMITTED			
Amount			
Commission			
Total amount			

Amount (in words): Rs. _____

Cash Deposit:

Cheque Deposit:

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

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

Amount						-	
Commission						-	
Total amount						-	

Amount (in words): Rs. _____

.....
Cashier

.....
Authorised Officer

UIN No	
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Remitter's Signature	
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.....
Remitter's ID verified from original

UIN No	
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P.S. If remittance is for any bank other than EBL, Rs.100/- additional charge will be levied

Authorised Official