

STATE BANK OF TRAVANCORE

..... Branch

ORIGINAL

Pay-in-Slip Number.....
Date.....

(To the Remitter - to be attached with the application)

Admission Number, if any

Name of Centre.....

Paid in to the Credit of KERALA STATE OPEN SCHOOL
 ACCOUNT No. 57001133674

Rupee in words

Purpose of Remittance	Rate	Rs.	Ps.
Course fee (1st/2nd instalment)			
Lab Fee			
Caution Deposit			
Registration Fee (Private)			
Exam Fee			
Postal Charge			
Fine/ Re-Registration			
Others			
Bank Commission		10	00
TOTAL			

Name and Address:
 of the Candidate
 (in capital letters).....

Signature of the Remitter

Amount Remitted Rs..... (Rupees.....
)

Cashier

Asst./ Deputy Manager

STATE BANK OF TRAVANCORE

..... Branch

DUPLICATE

Pay-in-Slip Number.....
Date.....

(To the Remitter - to be attached with the application)

Admission Number, if any

Name of Centre.....

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 ACCOUNT No. 57001133674

Rupee in words

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Others			
Bank Commission		10	00
TOTAL			

Name and Address:
 of the Candidate
 (in capital letters).....

Signature of the Remitter

Amount Remitted Rs..... (Rupees.....
)

Cashier

Asst./ Deputy Manager

STATE BANK OF TRAVANCORE

..... Branch

TRIPPLICATE

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Date.....

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Admission Number, if any

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TOTAL			

Name and Address:
 of the Candidate
 (in capital letters).....

Signature of the Remitter

Amount Remitted Rs..... (Rupees.....
)

Cashier

Asst./ Deputy Manager