


BRANCH'S COPY

DC No: _____ **Date:** _____
(To be entered by the bank)


UTTAN VIVIDH LAKSHYEE SHIKSHAN SANSTHA
 Keshav Srushti, Uttan, Bhayander (W), Thane: 401106.
 Tel.: 0091-22-28450707/0718, Fax: 0091-22-28450500

CHALLAN FOR PAYMENT OF SCHOOL FEES

Name of the Banker: IDBI BANK Bhayandar West Branch, Thane – 401101. DT.	Branch Code: (536) Bhayandar Tel.: 022-28192275 Fax.: 022-28188580
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Acct No. 5 3 6 1 0 4 0 0 0 0 3 8 1 1 9

Amount may be deposited in any branch of IDBI Bank

Student's Name*: _____

G.R. No.*: _____ **Std.*:** _____

Address :

SR.	TITLE	AMOUNT
A.	CAUTION MONEY	
B.	LODGING & BOARDING I	
C.	LODGING & BOARDING II	
D.	EDUCATIONAL DEV. FUND I	
E.	EDUCATIONAL DEV. FUND II	
F.	PENALTY	
G.	OTHERS	
TOTAL		

(In Word): Rupees

Name of the Depositor's Bank:

Cheque No. : _____ **Date:** _____

Signature of Bank Official _____ **Signature of Depositor** _____

• Name, GR. No. and Std. to be filled Compulsorily.

To be sent to Bhayander Branch on the date of actual credit of funds by collecting Branch

SCHOOL'S COPY

Unique ID No: _____ **Date:** _____
(To be entered by the bank)


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E.	EDUCATIONAL DEV. FUND II	
F.	PENALTY	
G.	OTHERS	
TOTAL		

(In Word): Rupees

Name of the Depositor's Bank:

Cheque No.: _____ **Date:** _____

Signature of Bank Official _____ **Signature of Depositor** _____

• Name, GR. No. and Std. to be filled Compulsorily.

STUDENT'S COPY

DC No: _____ **Date:** _____
(To be entered by the bank)


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E.	EDUCATIONAL DEV. FUND II	
F.	PENALTY	
G.	OTHERS	
TOTAL		

(In Word): Rupees

Name of the Depositor's Bank:

Cheque No. : _____ **Date:** _____

Signature of Bank Official _____ **Signature of Depositor** _____

• Name, GR. No. and Std. to be filled Compulsorily.
 • You are requested to mail/fax this challan to the school.