

BRANCH OFFICIALS TO CAREFULLY ENTER DETAILS AS BRANCHES ARE NOT PERMITTED TO DEBIT THE ACCOUNT -

FEE PAYMENT CHALLAN

BRANCH COPY

(USE SEPARATE CHALLANS FOR EACH POST)

ANDHRA PRAGATHI GRAMEENA BANK

HEAD OFFICE::KADAPA

DIRECT RECRUITMENT PROJECT - 2014

**INTERVIEW APPLICATION FEES PAYMENT CHALLAN
For Officer Scale – I & II / Office Assistant (Multipurpose)**

To be filled in by the BANK'S BRANCH

Branch Name

BIC Code.

Credit to A/c No.

1) 91011359379 (For Officer Scale-I & Scale-II)*
2) 91011358944 (For Office Assistant (Multipurpose))*

PAYMENT DATE

TRANSACTION No.

To be filled in by the CANDIDATE

POST APPLIED:

Category:

GEN/OBCSC/ST/PWD/
EXSM*

FEES PAID

Rs.

* CANDIDATE'S FULL NAME in BLOCK LETTERS:

() Mr. / Mrs. / Ms.

* Applicant's Name & Signature on this Payment Challan & on the Application Form SHOULD BE IDENTICAL.

Candidate's Signature: _____

Mobile /Telephone No. (with STD Code) :

Bank's Branch CASH RECEIVED Stamp

BANK'S AUTHORISED SIGNATORY

1. BRANCH TO ENSURE THAT BRANCH NAME,BIC No., AMOUNT PAYMENT DATE, and TRANSACTION ID & APPLICANT'S NAME ARE CORRECTLY & LEGIBLY NOTED IN THIS CHALLAN.

2. BRANCH TO CUT THIS PAYMENT CHALLAN INTO HALF ALONG MID LINE & HAND OVER APPLICANT'S COUNTERFOIL TO APPLICANT. RETAIN THE BANK'S VOUCHER PORTION FOR BRANCH RECORDS.

(Fee accepted between 28.04.15 to 13.05.15 only)

(ORIGINAL TO BE PRODUCED ALONG WITH THE CALL LETTER FOR INTERVIEW)

PHOTOCOPY MAY BE RETAINED

FEE PAYMENT CHALLAN

APPLICANT'S COUNTERFOIL

(USE SEPARATE CHALLANS FOR EACH POST)

ANDHRA PRAGATHI GRAMEENA BANK

HEAD OFFICE::KADAPA

DIRECT RECRUITMENT PROJECT - 2014

**INTERVIEW APPLICATION FEES PAYMENT CHALLAN
For Officer Scale – I & II/ Office Assistant (Multipurpose)**

To be filled in by the BANK'S BRANCH

Branch Name

BIC Code.

Credit to A/c No.

1) 91011359379 (For Officer Scale-I & Scale-II)*
2) 91011358944 (For Office Assistant (Multipurpose))*

PAYMENT DATE

TRANSACTION No.

To be filled in by the CANDIDATE

POST APPLIED:

Category:

GEN/OBCSC/ST/PWD/
EXSM*

FEES PAID

Rs.

* CANDIDATE'S FULL NAME in BLOCK LETTERS:

() Mr. / Mrs. / Ms.

* Applicant's Name & Signature on this Payment Challan & on the Application Form SHOULD BE IDENTICAL.

Candidate's Signature: _____

Mobile /Telephone No. (with STD Code) :

Bank's Branch CASH RECEIVED Stamp

BANK'S AUTHORISED SIGNATORY

1. BRANCH TO ENSURE THAT BRANCH NAME,BIC No., AMOUNT PAYMENT DATE, and TRANSACTION ID & APPLICANT'S NAME ARE CORRECTLY & LEGIBLY NOTED IN THIS CHALLAN.

2. BRANCH TO CUT THIS PAYMENT CHALLAN INTO HALF ALONG MID LINE & HAND OVER APPLICANT'S COUNTERFOIL TO APPLICANT. RETAIN THE BANK'S VOUCHER PORTION FOR BRANCH RECORDS.

(Fee accepted between 28.04.15 to 13.05.15 only)

*STRIKE OUT WHICH EVER NOT APPLICABLE.