

**Bank Copy**

**CCL Customer's Copy**

**CAUTION : USE "PAYFEE" MENU OPTION IN FINACLE INSTEAD OF "TM"  
COUSRE CODE - 0, FEE CODE - 0**



DIST. NO.

Branch

Institute Name **CENTRAL COALFIELDS LIMITED**

Institute ID **CCLR1**

Date of Deposit

DD                  MM                  YY

DIST. NO.

Branch

Institute Name **CENTRAL COALFIELDS LIMITED**

Institute ID **CCLR1**

Date of Deposit

DD                  MM                  YY

**DETAILS OF THE DEPOSITOR (BIDDER)**

<b>Name</b> (Enter in Student's/ CCL Customer's Name field)	<input type="text"/>
<b>CCL Registration No.</b> (Enter in Enrollment No. field)	<input type="text"/>

**DETAILS OF THE BIDDER**

<b>Name</b>	<input type="text"/>
<b>CCL Registration No.</b>	<input type="text"/>

**Cheque Deposit:**

Chq No	Date of Chq	Debit A/c No.	Name of Bank	Rs.	Ps
			PNB		

**Cheque Deposit:**

Chq No	Date of Chq	Debit A/c No.	Name of Bank	Rs.	Ps
			PNB		

Amount (in words): Rs. \_\_\_\_\_

Amount (in words): Rs. \_\_\_\_\_

Name of the Depositor

Signature

Address for communication

Phone No.

Name of the Depositor

Signature

Address for communication

Phone No.

**For Bank use only**

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Acknowledgement

Cashier/Officer

Acknowledgement

Cashier/Officer