

**CHALLAN FROM (CASH VOUCHER)**

**BRANCH COPY**

KASHI GOMTI SAMYUT GRAMIN BANK - 01  
 Application Fee Details  
 Recruitment of **Officer Scale - 1**  
 in **Kashi Gomti Samyut Gramin Bank**

Account No : 616401010050026  
 at **KASHI GOMTI SAMYUT GRAMIN BANK**  
 Faatman Road Branch (code 161640) Maldahiya Varanasi  
 Candidate's Name : Mr./Mrs./Kum.  
 Category\* : SC/ST/PC/EXS - Only Postage Rs.50/-  
 OBC/GEN - Application Fee & Postage Rs. 350/-

Date of Birth :  
 Branch Name :  
 Branch Code No.# :  
 Trasaction ID No.# : Date:  
 Deposit Date :  
 Application Fee/Postage Rs.....  
 (Rupees ..... only)

Signature of Depositor  
 Address.....  
 Phone/Mobile No.  
 \*Tick whichever is applicable.  
 # Fee receiving branch is advised to write the Transaction ID No., date and branch code no. above invariably.

Authorized Signatory  
 Stamp

**CHALLAN FROM (CASH VOUCHER)**

**CANDIDATE'S COPY**

KASHI GOMTI SAMYUT GRAMIN BANK - 01  
 Application Fee Details  
 Recruitment of **Officer Scale - 1**  
 in **Kashi Gomti Samyut Gramin Bank**

Account No : 616401010050026  
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 Deposit Date :  
 Application Fee/Postage Rs.....  
 (Rupees ..... only)

Signature of Depositor  
 Address.....  
 Phone/Mobile No.  
 \*Tick whichever is applicable.  
 # Fee receiving branch is advised to write the Transaction IDNo., date and branch code no. above invariably.  
 (This part of the challan will be required to be submitted by the candidate at the time of written test alongwith a photograph, otherwise the candidate will not be allowed to appear at the examination)

Authorized Signatory  
 Stamp

