

**Depositor's Copy**  
**STATE BANK OF INDIA**

JOURNAL No. .... Date.....  
Branch ..... Date.....

Please credit in SB A/c No. **30821405922** of D.D.O.  
Patrachar Vidyalaya, Delhi  
Name of the Candidate .....  
Address.....

On account of

1. Admission Fee	Rs.....
2. Late Fees	Rs.....
Total	Rs.....
3. Bank Charges	Rs...60.../-
Grand Total	Rs.....
Rs.....	

(in words)

All S.B.I. Branches shall mention journal number all copies of the challan.  
(To be attached with form by the Depositor.)

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Patrachar Vidyalaya Copy through SBI Old Sectt. Delhi

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