

# Bank Copy



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<u>Y</u>	White Bank of Inc

#### BIHAR PUBLIC SERVICE COMMISSION COMPETITIVE EXAMINATION

NAME OF BANK BRANCH: PATNA SECRETARIAT

ACCOUNT 1	No.	3	1	6	5	0	2	4	3	4	1	0
JOURNAL	NO.	#										
Date		N	Iont	h			Ye	ar				
1. # Advertise		NI		1 1	/20	1.6		•		•		

- 2. Name of Examination: Director, Indira Gandhi Institute of Cardiology (PMCH), Patna
- 3. #Name of the Candidate :-
- 4. \*Reservation Category General/EBC/BC/SC/ST

5.	Fee :-	* (1) General/EBC/BC	<b>3</b> –	Rs.	1	0	0
		* (2) SC/ST	_	Rs.	0	2	5
		(Only of Bihar) (3) Bank Charges	_	Rs.	0	5	0
		(4) Total	_	Rs.			

6. Total Amount (In Words):- Rs.

Teller's Signature & Seal

Depositor's Signature

NOTE: SBI BRANCHES TO CONTACT ON HELPLINE NO. 9771457908 IN CASE ANY OUERY IN THIS REGARD.

Abbreviations used :- EBC - Extremely Backward Class, BC - Backward Class, SC - Scheduled Caste, ST - Scheduled Tribe

Note: For SC/ST of other states, Fee as per General Category.

- \* Strike out the option (s) not applicable.
- # Instruction for SBI Branches:
- (i) Journal No. should be strictly mentioned at the appropriate place in challan.
- (ii) "Advertisement No." should be fed into CB Screen under "Registration/Ref.No.".
- (iii) Name of candidate should be mentioned under Head "Name of the Applicant"

雅	विहार	लोक	सेवा	आयोग,	पटना
3	Bhar P	ublic Se	rvice C	omentoior	, Patrus

# **BPSC's** Copy



#### BIHAR PUBLIC SERVICE COMMISSION COMPETITIVE EXAMINATION

NAME OF BANK BRANCH: PATNA SECRETARIAT

ACCOU	NT N	o. 3	1	6	5	0	2	4	3	4	1	0
JOURN	IAL N	IO. #										
Date		N	/Iont	h			Ye	ar				

- 1. # Advertisement No. :- 11/2016
- 2. Name of Examination: Director, Indira Gandhi Institute of Cardiology (PMCH), Patna
- 3. #Name of the Candidate :-\_\_\_\_
- 4. \*Reservation Category General/EBC/BC/SC/ST

5.	Fee :-	* (1) General/EBO	C/BC –	Rs.	1	0	0
		* (2) SC/ST	_	Rs.	0	2	5

(Only of Bihar) (3) Bank Charges – Rs.

(4) Total - Rs.

6. Total Amount (In Words) :- Rs.

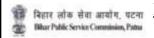
Teller's Signature & Seal Depositor's Signature

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### Depositor's Copy



### BIHAR PUBLIC SERVICE COMMISSION COMPETITIVE EXAMINATION

NAME OF BANK BRANCH: PATNA SECRETARIAT

ACCOU	NT I	No.	3	1	6	5	0	2	4	3	4	1	0
JOURN	IAL I	NO.	#										
Date			N	1ont	h			Ye	ar				

- 1. # Advertisement No. :- 11/2016
- 2. Name of Examination: Director, Indira Gandhi Institute of Cardiology (PMCH), Patna
- 3. #Name of the Candidate :-\_\_\_\_
- 4. \*Reservation Category General/EBC/BC/SC/ST

5.	Fee :-	* (1) General/EBC/BC - Rs.	1	0	0

\* (2) SC/ST - Rs. (Only of Bihar)

(3) Bank Charges Rs. (4) Total - Rs.

6.	Total .	Amount (	ln Word	ls) :- Rs.	 	

Teller's Signature & Seal

Depositor's Signature

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