

**For Contribution Remittance** 

Name of Depositing Branch

Remitter's Copy

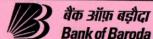
Date: \_\_/\_\_/\_

Pay-in-Slip for THE KERALA NON-RESIDENT KERALITES' WELFARE BOARD

(Money can be remitted into any branch of BANK OF BARODA)

Transaction ID:											
Paid into the credit of Kerala Non-Resident Keralites'											
Welfare Board's CONTRIBUTION											
A/C: 29860100006132 maintained with BANK OF BARODA, PEROORKADA BRANCH, SOL ID 2986,											
Thiruvananthapuram, Kerala											
Name of Applicant:											
Initials:											
Registration Number :											
<del>- 4</del>											
Membership 5 to Category: 98											
1A Rs. 300 x = = 18/2A Rs. 100 x = =											
BankCharge = 3											
Total Rs.											
Signature of Remitter:											
Name and Address:											
Landline/Mobile No:											
Cashier/SWO Officer											

Note to Cashier: 10 digit Registration No and Name should compulsarily entered on Remarks column in Finacle



	Bank of Baroda													
	For (	Cont	ribu	tion	Rem	ittan	ce			Bai	nk	Copy	,	
	Pay-in-Slip for THE KERALA NON-RESIDENT KERALITES' WELFARE BOARD (Money can be remitted into any branch of BANK OF BARODA)													
									D	ate				
1	Name	of	Depo	ositir	ng Bi	ranch	:							
Transaction ID:														
	Paid into the credit of Kerala Non-Resident Keralites Welfare Board's <u>CONTRIBUTION</u> <u>A/C: 29860100006132</u> maintained with BANK OF BARODA, PEROORKADA BRANCH, SOL ID 2986, Thiruvananthapuram, Kerala													
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	Landli	ne/	Mobi	ile N	0:									
	Cashie	or/S	wo										office	

Note to Cashier: 10 digit Registration No and Name should compulsarily entered on Remarks column in Finacle