

**SENATE SECTT. EMPLOYEES CO-OPERATIVE
HOUSING SOCIETY LTD. (Regd.) (SSECHS), ISLAMABAD.**

Bank Copy

Bank Name: Allied Bank Ltd Date: _____
 Branch Code: 0947 Challan#: _____
 Branch Name: I-8, Markaz Branch Islamabad

ONLINE CHALLAN
 ALLIED BANK LTD

TITLE: SENATE SECTT EMP CO. H SOCIETY
 A/c No: 0010003437620054

Name:	
Membership No:	
CNIC#:	
Contact No:	
Plot Size:	

Account Head: (please tick (v) relevant box)

Processing Fee: Transfer Fee:
 Cost of Land: Cost of Development:

TOTAL AMOUNT (Figures) Rs:
Amount in words: _____

Paid by Cash Paid by Cheque/DD/PO etc:

Detail on Cheque/DD/PO/Instrument:

Bank Name: _____ Branch Name: _____
 Chq/DD/PO No: _____ Amount: _____

Note:
 1. Cash/Cheque should always be deposited at the respective counter and electronic computer generated receipt printed through flatbed printer on challan should be obtained before leaving the counter, please be sure to check the receipt and satisfy that complete details including account number and amount deposited are correctly printed failing which the bank will not be responsible.
 2. Send original Challan (Society) copy along application form to Society office.
 3. This challan Form is for Cash/Cheque/DD/PO Deposit

اپنے رقموات کو ہمیشہ کاؤنٹر پر جمع کروائیں اور چالان پر فلیٹ بڈ برنر سے الیکٹرانک رسید حاصل کریں اور کاؤنٹر چھوڑنے سے پہلے الیکٹرانک رسید کے مکمل کوائف بمع رقم اور اکاؤنٹ نمبر چیک کر لیں بصورت دیگر بینک ذمہ دار نہ ہوگا

 Name & Signature of Depositor Depositor Contact#

 Authorized Signature Authorized Signature

**SENATE SECTT. EMPLOYEES CO-OPERATIVE
HOUSING SOCIETY LTD. (Regd.) (SSECHS), ISLAMABAD.**

Customer Copy

Bank Name: Allied Bank Ltd Date: _____
 Branch Code: 0947 Challan#: _____
 Branch Name: I-8, Markaz Branch Islamabad

ONLINE CHALLAN
 ALLIED BANK LTD

TITLE: SENATE SECTT EMP CO. H SOCIETY
 A/c No: 0010003437620054

Name:	
Membership No:	
CNIC#:	
Contact No:	
Plot Size:	

Account Head: (please tick (v) relevant box)

Processing Fee: Transfer Fee:
 Cost of Land: Cost of Development:

TOTAL AMOUNT (Figures) Rs:
Amount in words: _____

Paid by Cash Paid by Cheque/DD/PO etc:

Detail on Cheque/DD/PO/Instrument:

Bank Name: _____ Branch Name: _____
 Chq/DD/PO No: _____ Amount: _____

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 Name & Signature of Depositor Depositor Contact#

 Authorized Signature Authorized Signature

**SENATE SECTT. EMPLOYEES CO-OPERATIVE
HOUSING SOCIETY LTD. (Regd.) (SSECHS), ISLAMABAD.**

Society Copy

Bank Name: Allied Bank Ltd Date: _____
 Branch Code: 0947 Challan#: _____
 Branch Name: I-8, Markaz Branch Islamabad

ONLINE CHALLAN
 ALLIED BANK LTD

TITLE: SENATE SECTT EMP CO. H SOCIETY
 A/c No: 0010003437620054

Name:	
Membership No:	
CNIC#:	
Contact No:	
Plot Size:	

Account Head: (please tick (v) relevant box)

Processing Fee: Transfer Fee:
 Cost of Land: Cost of Development:

TOTAL AMOUNT (Figures) Rs:
Amount in words: _____

Paid by Cash Paid by Cheque/DD/PO etc:

Detail on Cheque/DD/PO/Instrument:

Bank Name: _____ Branch Name: _____
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