

SAVING A/C NO.:	UIN :	Centre
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FULL Name संपूर्ण पांव
1. Shri./Smt./Kum _____

Specimen Signature स्वाक्षरी नमुना

Photo

Received ₹ . _____
Rupees _____
On _____
By Cash/D.D./Cheque/ICICI Bk.

FOR OFFICE USE ONLY

Account opened on _____
Signature admitted _____

CONTACT NO.
Cashier

Clerk

Accounts Officer/C.E.O.