

# Bank's Copy



### BIHAR PUBLIC SERVICE COMMISSION

Lecturer (Repertory) in Govt. R.B.T.S. Homeopathic Medical College & Hospital, Muzaffarpur

Advertisement No. :- 40/2017 SDI DOWED IVOTI ACCOUNT 21650242410

5D110WER 51011ACCOUNT-51050245410												
JOURNAL NO. #												
Date		N	1onth			Ye	ar					
1. Name of the Candidate:-												
2. Date of	Birt	:h :										
3. *Reservation Category – GEN/EBC/BC/SC/ST/DISABLED												
4. Fee :- *(1) General/EBC/BC - Rs. 1 0 0												
* (2) SC/ST/DISABLED (As per Advertisement) (3) Bank Charges - Rs.  0 2 5  0 5 0											] ]	
(4) Total – Rs.												
5. Total Amount (In Words) :- Rs.												
Teller's Signature & Seal Depositor's Signature												
NOTE: SBI BRANCHES TO CONTACT ON HELPLINE NO.												

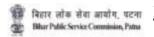
OTE: SBI BRANCHES TO CONTACT O	N HELPLINE NO.
9771457908 IN CASE ANY OUER	Y IN THIS REGARD

Abbreviations used :- GEN- General 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"







### BIHAR PUBLIC SERVICE COMMISSION

Lecturer (Repertory) in Govt. R.B.T.S. Homeopathic Medical College & Hospital, Muzaffarpur Advertisement No.: - 40/2017

## SRI POWER IVOTI ACCOUNT- 31650243410

	5D110WER 91011MCCOUNT-51030245410														
	JOURNAL NO. #														
	Date			M	Month					Ye	ar				
	1. Name of the Candidate:-														
2. Date of Birth :-															
3.*Reservation Category – GEN/EBC/BC/SC/ST/DISABLED															
4	4. Fee :- *(1) General/EBC/BC - Rs. 1 0 0														
	* (2) SC/ST/DISABLED 0 2 5														
	(As per Advertisement) (3) Bank Charges - Rs. 0 5 0														
	(4) Total – Rs.														
5	5.Total Amount (In Words) :- Rs.														
-	Teller's Signature & Seal Depositor's Signature														

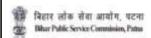
#### NOTE: SBI BRANCHES TO CONTACT ON HELPLINE NO. 9771457908 IN CASE ANY QUERY IN THIS REGARD.

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## Depositor's Conv



## **BIHAR PUBLIC SERVICE COMMISSION**

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SBI POWER JYOTT ACCOUNT- 31650243410												
JOURN												
Date		M	Ionth	1			Ye	ar				
<ol> <li>Name o</li> <li>Date of</li> </ol>												
3.*Reservation Category – GEN/EBC/BC/SC/ST/DISABLED												
4. Fee :-	4. Fee :- * (1) General/EBC/BC - Rs. 1 0 0											
	* (2) SC/ST/DISABLED 0 2 5											
(As per Advertisement) (3) Bank Charges - Rs. 0 5 0												
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