



PAY IN SLIP
CANDIDATE COPY

Challan No..... Date.....

STATE BANK OF INDIA

Deposited at SBI

For Credit of

**BOARD OF SECONDARY EDUCATION, ODISHA,
CUTTACK**

(Fee Collection A/C)

A/C No.:

3	7	5	2	6	8	0	4	5	2	5
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Fee : Rs. _____

Bank Charges : Rs. _____

Total Charges : Rs. _____

BANK RECEIPT SEAL



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BANK RECEIPT SEAL

Class/ Course – Correspondence Course
Fee Category – D

(Total amount to be deposited in B.S.E. Account, Bank Branches need not recover bank charges separately.)

Journal No. (To be filled by Branch) –

Name of the Candidate :

District Code :

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Fee for filling up of application forms for Correspondence Course HSC Examination.....

Full Signature of the Candidate

Class/ Course – Correspondence Course
Fee Category – D

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