
	<b>ING VYSYA BANK</b>		Bank Copy
	Membership and Application processing Fee		
	<b>SHRINIVAS BALAJI CHARITABLE TRUST</b>		
	(To be filled by candidate)		



Account Holder's Name	Shrinivas Balaji Charitable Trust (Reg.)
Account No.	170010104638
IFSC Code	VYSA0001700

Member's Name	First Name	Middle Name	Last Name
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address	<input type="text"/>		
	Pincode - <input type="text"/>		

Processing Fee (Rs.)	<b>950/-</b>	In Words
		Nine hundred fifty only
<input type="text"/>		
Signature of the Member		

(To be filled by the Bank)

SBI Branch Name	<input type="text"/>
Branch Code	Journal No
<input type="text"/>	<input type="text"/>
Deposit Date	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Branch Stamp	Authorized Signatory

	<b>ING VYSYA BANK</b>		Member Copy
	Membership and Application processing Fee		
	<b>SHRINIVAS BALAJI CHARITABLE TRUST</b>		
	(To be filled by candidate)		

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