


	STATE BANK OF INDIA	
	Membership and Application processing Fee	
	SHRINIVAS BALAJI CHARITABLE TRUST	
	(To be filled by candidate)	

	STATE BANK OF INDIA	
	Membership and Application processing Fee	
	SHRINIVAS BALAJI CHARITABLE TRUST	
	(To be filled by candidate)	

Account Holder's Name	D.Katakdhond The President, Shrinivas Balaji Charitable Trust, IISc., Umadi – 560 012
Account No.	30158929347
IFSC Code	SBIN0002214

Account Holder's Name	D.Katakdhond The President, Shrinivas Balaji Charitable Trust, IISc., Umadi – 560 012
Account No.	30158929347
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Member's Name	First Name	Middle Name	Last Name
Address			
	Pincode -		

Member's Name	First Name	Middle Name	Last Name
Address			
	Pincode -		

Processing Fee (Rs.)	950/-	In Words
		Nine hundred fifty only
Signature of the Member		

Processing Fee (Rs.)	950/-	In Words
		Nine hundred fifty only
Signature of the Member		

(To be filled by the Bank)

(To be filled by the Bank)

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

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