

**DEMAND DRAFT/PAYORDER APPLICATION FORM**

DD/PO APPLICATION FORM

DD /PO Number

PLEASE ISSUE A  DEMAND DRAFT  PAY ORDER

Date  BRANCH

Against  Cash  Cheque  Debit my Account No.   
 Debit My/Our Account No.  with your charges.

NAME OF APPLICANT

AMOUNT IN WORDS		
<input type="text"/>		
	Rs.	P.
AMOUNT		
EXCHANGE		
Pocket Exp. %		
TOTAL		

Cheque No.	Rs.	P.	PAYEE'S NAME	AMOUNT	Rs.	P.
CASH			AMOUNT IN WORDS	EXCHANGE		
X 2000				Out of Pocket Expn.		
X 1000				TOTAL		
X 500			PAYABLE AT			
X 200			SIGNATURE OF APPLICANT	NAME & ADDRESS OF APPLICANT		
X 100						
X 50						
X 20						
X 10						
X 5						
X 2						
X 1						
COINS			PAN NO.	MOBILE/TELEPHONE		
TOTAL				EMAIL		

**CASHIER/ACCOUNTANT**

FOR BRANCH USE ONLY

CREDIT: BILLS PAYABLE A/C.DD /PO ISSUED

INR  
(Rupees in words)

\_\_\_\_\_  
AUTHORISED SIGNATORIES

Acknowledgement from the Customer after receipt of the instrument \_\_\_\_\_