J&K EMPLOYEES PROVIDENT FUND ORGANIZATION

OFFICE OF THE ADDITIONAL PROVIDENT FUND COMMISSIONER,

RAIL HEAD - JAMMU. CHALLAN

Net Amount to be credited after deduction of all charges **ORIGINAL**

FORM-B

Transfer

J&K Bank EMPLOYEES PROVIDENT FUND

Ledger Folio			Pay-in-Slip Account No. CD -5315
TO BE FILLED IN BY	THE BANK		FOR CHEQUES/FUND PAID INTO THE CREDIT of the Employee's
Cheque No			
Dated	Rs.	P.	Provident Fund Account No. CD - 5315
Amount of cheques Collection charges, if any			Rupees
Contribution			Contribution/Refund of Withdrawal payable for the Month of TO under the J&K Employee's Provident Fund Scheme, 1961.
Refund of withdrawals			On behalf of
Net Amount credited			Employer's Code No: - JK/J Address:
Passing Official			••••••
Scroll Transfer			(Depositor)

J&K EMPLOYEES PROVIDENT FUND ORGANIZATION OFFICE OF THE ADDITIONAL PROVIDENT FUND COMMISSIONER,

RAIL HEAD - JAMMU.

CHALLAN

Net Amount to be credited after deduction of all charges **ORIGINAL**

FORM-B

Transfer

J&K Bank EMPLOYEES PROVIDENT FUND

Ledger Folio TO BE FILLED IN BY THE BANK			Pay-in-Slip Account No. CD - 5316 FOR CHEQUES/FUND
Cheque No			PAID INTO THE CREDIT of the Employee's
Dated	Rs.	P.	Provident Fund Account No. CD - 5316
Amount of cheques Collection charges, if any Net Amount credited			Rupees On realization as per particulars overleaf on account of Administrative Charges payable for the Month of
Passing Official			Address:
Scroll Transfer]

(Depositor)

J&K EMPLOYEES PROVIDENT FUND ORGANIZATION OFFICE OF THE ADDITIONAL PROVIDENT FUND COMMISSIONER, RAIL HEAD - JAMMU.

Net Amount to be credited after deduction of all charges **ORIGINAL**

FORM-B

Transfer

J&K Bank EMPLOYEES PROVIDENT FUND

Ledger Folio			Pay-in-Slip Account No. CD - 9477
TO BE FILLED IN BY T	Г <mark>НЕ ВА</mark> К		FOR CHEQUES/FUND PAID INTO THE CREDIT of the Employee's
Cheque No			
Dated	Rs.	P.	Provident Fund Account No. CD - 9477 Rupees
Amount of cheques			
Collection charges, if any			On realization as per particulars overleaf on account of
			Employees Deposit Linked Insurance Scheme payable
Net Amount credited			for the Month of TO
			On behalf of
Passing Official			(Name of Employer) Employer's Code No: - JK/J
Scroll Transfer			Address:

(Depositor)