

Form NEFT-2A

**ALLAHABAD BANK**  
 Branch Name & Code

**NEFT / RTGS FORM**  
**ELECTRONIC FUNDS TRANSFER**

(To be filled by the Applicant in Block Letters)

DETAILS OF APPLICANT		DETAILS OF BENEFICIARY	
Amount to be Remitted (Rs.)	15000 = 10	Beneficiary Name :	WBHRA
Remittance Charge (Rs.)		Address:	
Total Amount :		Bank Name (if any)	STATE BANK OF INDIA
Amount in words:		Account No. (if any):	97809721103
By Cheque/Cash <input type="checkbox"/> Cash <input type="checkbox"/> Account		Telephone/Mobile No.	
Account No.:	50432690705	IFSC Code	SBIN0014524
Type of Account :	<input type="checkbox"/> SB <input checked="" type="checkbox"/> CA <input type="checkbox"/> CC <input type="checkbox"/> OD	No. (if any)	
Cheque Number:	034458		
Cheque Date :	12 09 19		
Remitter's Name :	ARBI CREATION		
Address :	28, Ram Lal Banerjee Road Kol. 700036		
Telephone / Mobile No.	9830822031		
Passport/PAN/Driving License/Telephone Bill/ ID Card No (If Any)	A6R9893837		

We agree and abide to Terms &amp; Conditions mentioned overleaf &amp; INDO-NEPAL FUND Transfer Rules

Date: 12.09.2019

 FOR ARBI CREATION  
 Jitendra Biswas  
 (Applicant's Signature)

FOR BANK'S USE ONLY

Transactions entered as per details of Beneficiary as given above.	Applicant's Signature Verified, Transaction Authorized & Funds Remitted through NEFT as per the details of Beneficiary given above.
Time :	Journal No.:
Date:	Txn Ref No:
Authorized Official (Maker) with SS No.	Authorized Official (Checker) with SS No.
	Date
	Time

Cut Here

ALLAHABAD BANK \_\_\_\_\_ Branch

ACKNOWLEDGEMENT

Received Application Form from (name); \_\_\_\_\_ SB/CA/CC/OD/Cash

Account No. \_\_\_\_\_ For Rs. \_\_\_\_\_ Rs. (In Words)

Only

On Date \_\_\_\_\_ Time \_\_\_\_\_ Hours for Indo-Nepal Fund Transfer as detailed below:

Beneficiary Name & Address	Bank Name (if any)
Acct No. (if any)	Mobile/ Tel. No.
Amt of Remittance	Remittance Charge

Authorized Signatory: