## CHALLAN

TR Form F.C.2 Payee Copy														
Department						Date			F	Form ID				
Type of Payment						Payee Details								
Office Name						Dept ID (If Any)								
Location						PAN No (If Appliac	able)							
Year		Period :: From			То	Full Name								
Account Head Details			Code	Amount in Rs.	Flat/Block no,Premises/Bldg									
					Road/Street, Area/Locality									
					Town/City/District									
					PIN									
				REMARKS (If Any)										
						1								
						1								
						1								
						1								
				7										
						Amount In								
Total						Words								
Payment Details Cash / Cheque-DD						FOR USE IN RECEIVING BANK								
Cheque-DD Details					Bank CIN No									
Cheque/DD No				Date										
Name of Bank					Bank-Branch									
Name of Branch						Scroll No								

Verified. Please Accept Payment
Signature and Designation of person verifying Payment with Stamp
Note: The Account Head and Code should be verified by the dept. / treasury wherever necessary.

Signature of Person Making Payment

CHALLAN

				HALLAN Form F.C.2					Depa	artment	Сору	
				Date Form ID								
Type of Payment					Payee Details							
	Dept ID (If Any)											
				PAN No (If Appliac	able)							
	Period :: Fr	om	То	Full Name								
Account Head Details			Amount in Rs.	Flat/Block no,Premises/Bldg								
				Road/Street, Area/L	ocality							
				Town/City/District								
				PIN								
	REMARKS (If Any)											
				1								
				1								
				1								
				1								
				1								
SCHEME_CODE				Amount In	-							
Total				Words								
Payment Details Cash / Cheque-DD					FOR USE IN RECEIVING BANK							
Cheque-DD Details					Bank CIN No							
Cheque/DD No					Date							
				Bank-Branch								
				Scroll No								
	ails	Cash / C	Cash / Cheque-DD	Period :: From To  ails Code Amount in Rs.  Cash / Cheque-DD	TR Form F.C.2  Date  Dept ID (If Any)  PAN No (If Appliac  Period :: From To Full Name  ails  Code Amount in Rs. Flat/Block no,Premis  Road/Street, Area/L  Town/City/District  PIN  REMARKS (If Any)  Amount In  Words  Cash / Cheque-DD  Cheque-DD Details  Bank CIN No  Date	TR Form F.C.2  Date  Dept ID (If Any)  PAN No (If Appliacable)  Period :: From To Full Name  ails Code Amount in Rs. Flat/Block no,Premises/Bldg Road/Street, Area/Locality Town/City/District PIN  REMARKS (If Any)  Amount In Words  Cash / Cheque-DD FOR US  Cheque-DD Details Bank CIN No Date	TR Form F.C.2  Date  Payee  Dept ID (If Any)  PAN No (If Appliacable)  Period :: From To Full Name  alls Code Amount in Rs. Flat/Block no,Premises/Bldg Road/Street, Area/Locality Town/City/District PIN REMARKS (If Any)  REMARKS (If Any)  Amount In Words  Cash / Cheque-DD FOR USE IN R Cheque-DD Details Bank CIN No Date	TR Form F.C.2    Date	Date   Form ID	TR Form F.C.2   Dept   Form ID	TR Form F.C.2   Department	TR Form F.C.2   Department Copy   Form ID     Date   Form ID     Date   Payer Details   Dept ID (if Any)   Dept ID (if Any)

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Signature of Person Making Payment

CHALLAN

				TR Form F.C.2		Treasury Copy					
Department				Date		Form ID					
Type of Payment						Payee Details					
Office Name				Dept ID (If Any	Dept ID (If Any)						
Location				PAN No (If App	oliacable)						
Year	Period	:: From	То	Full Name							
SCHEME_CODE				Amount In							
Total				Words							
Payment Details	Cash	/ Cheque-DD			FOR USE IN RECEIVING BANK						
	Cheq	ue-DD Details		Bank CIN No							
Cheque/DD No				Date							
Name of Bank				Bank-Branch							
Name of Branch				Scroll No							