THE PRATAP CO-OP. BANK LTD. **POSITIVE PAY FORM**

Branch :	Date :	POS	SITIVE PAY FORM	Date :
A/c. No.:	Mob.:	Branch Name :		A/c. No
Customer Name :		Customer Name :		Mob. No
Name of Beneficiery/Payee		Name of Beneficiery / Pay	ee	
AmtChq.No				Date
Amount in words :		Amount in words		
POSITIVE	O-OP. BANK LTD. E PAY FORM	Regd. Off. : Asma Ma		TIVE BANK LTD. 39 Nagdevi Street, Mumbai-400 003.
				Data :
A/c. No.:	Date :			Date :
	Mob.:	Branch Name :		Date :
Customer Name :	Mob.:			
Name of Beneficiery/Payee	Mob.:	Customer Name :Name of Beneficiery / Pay	ee	A/c. No

Amount in words : _____ Amount in words _____

THE PRATAP CO-OPERATIVE BANK LTD. Regd. Off.: Asma Manzil, Office No. 2, 1st Floor, 39 Nagdevi Street, Mumbai-400 003.