



THE PRATAP CO-OP. BANK LTD.

POSITIVE PAY FORM

Branch : _____ Date : _____

A/c. No.: _____ Mob.: _____

Customer Name : _____

Name of Beneficiary/Payee _____

Amt. _____ Chq.No. _____ Dt. _____

Amount in words : _____



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THE PRATAP CO-OPERATIVE BANK LTD.

Regd. Off. : Asma Manzil, Office No. 2, 1st Floor, 39 Nagdevi Street, Mumbai-400 003.

POSITIVE PAY FORM

Date : _____

Branch Name : _____ A/c. No. _____

Customer Name : _____ Mob. No. _____

Name of Beneficiary / Payee _____

Amount _____ Cheque No. _____ Date _____

Amount in words _____



THE PRATAP CO-OPERATIVE BANK LTD.

Regd. Off. : Asma Manzil, Office No. 2, 1st Floor, 39 Nagdevi Street, Mumbai-400 003.

POSITIVE PAY FORM

Date : _____

Branch Name : _____ A/c. No. _____

Customer Name : _____ Mob. No. _____

Name of Beneficiary / Payee _____

Amount _____ Cheque No. _____ Date _____

Amount in words _____