

BHAVNAGAR DISTRICT CO-OPERATIVE BANK LTD. BHAVNAGAR

13 , Sahakar Bhavan , Gangajaliya Talav Po No-82 , Bhavnagar-364001

Phone No-0278 – 2511324 , Fax: 0278 – 2428981.

Mail : accounts@bhavnagardcb.in**જુલો બેંક**
ભાવનગરThe Branch Manager
Bhavnagar District Co-operative Bank Ltd.
Branch _____Date: _____
Time: _____

Dear Sir/Madam,

Re:- Positive Pay confirmation for cheques presented in CTS Clearing/Counter.I _____ (Name of the Account holder) having an
account _____ (Account number) in your
_____ (name of the Branch).

I hereby confirm that I have issued the following cheque/s in the captioned account with details as mentioned hereunder:-

Sr. No.	Cheque Number	Amount	Payee's Name	Cheque Date	Transaction Code(*)

(*) 2 digits Transaction code is available on the Right Side of the MICR Band of the cheque.

I understand that Bank may reject any/all of the cheque/s at the time of presentment in clearing/payment on counter due to any mismatch in the particulars of the cheque/s with the provided inputs as above. I also confirm to maintain sufficient balance in the account to honor aforesaid cheque/s.

_____(Seal/Signature must be tallied with the record)

_____(Name of the signatory/signatories)

_____(Registered mobile number)

Note – All authorized signatories/signatory as per the operational instructions in the account can provide this confirmation. Original signed form will only be accepted during the Banking hours of the Branch.

For Office Use only

Confirmation entered at	Time & Date	Signature of maker
Confirmation verified at	Time & Date	Signature of checker

(Confirmations verified up to 06.00 PM will only be processed for next clearing session. Afterward, all the confirmations will be processed for subsequent clearing session)