



National Bank of Pakistan
نیشنل بینک آف پاکستان

Proceedings-SZMC



For Subscription (Institutional)

(Depositor Copy)

INTER BRANCH TRANSACTION PAY IN SLIP

Branch Code:				
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Branch Name:	
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Date:						
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Depositor Copy	✓
CASH DEPOSIT	
FUND TRANSFER	

CREDITED TO:

Branch Code				Branch Name
1	7	0	7	NBP Shaikh Zayed Hospital, Lahore Branch

Ref / IBT Number

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Tick A/C Type			A/C Type	ACCOUNT NO.																			
PLS ✓	C/A	ADV																					
P	K	7	9	N	B	P	A	1	7	0	7	0	0	3	0	0	1	4	0	9	6	1	9

Name: SKZ MEDICAL & DENTAL COLLEGE LAHORE

Rs.	3	0	0	0	0	/	-				
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Amount in Words: Thirty Thousand Only

Bank's Stamp

Authorized
Signature

Applicant's Signature

Name : _____

Father's Name : _____

CNIC No. : _____

Phone No. : _____



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