	Branch Ma Sahakari B	_					
						Date:	
Bran	ch			Time:			
Dear	Sir/Madar	n,					
Re: F	Positive Pa	y Confirmati	on of Ch	eques to be Pre	sented in CTS Cle	earing.	
I				(Name of the Account holder)			
havi	ng an Acco	unt No				Branch.	
	eby confirr		issued t	ne following che	eque/s in the capt	tioned account with det	ails as
Sr.	Cheque	Amount	Amour	nt in Words	Payee's Na	ame	Cheque
No.	No.	Rs.					Date
to ar All a	ny mismato uthorized s	h in the part ignatories/si	iculars of	f the cheque/s w	vith the provided ational instruction	e of presentment in clear inputs as above. In of the account had pro	
				(Signature/Sea	al must be tallied	with the record)	
				(Name of the S	Signatory/signato	ories)	
				(Registered M	obile Number)		
For (Office Use	<u>only</u>					
Sign	verified B	<u>y :</u>					
Signature & Empl.code				Γime & Date			