

कार्यपालक अभियंता का कार्यालय
ग्रामीण कार्य विभाग, कार्य प्रमंडल, त्रिवेणीगंज।

पत्रांक 269 / त्रिवेणीगंज,
प्रेषक,

दिनांक 12/2/2020

ई0 सुरेश कुमार सिंह,
कार्यपालक अभियंता।

सेवा में,

Post Master,
Post- Supaul Bazar,
Supaul.

विषय :- T.D. सत्यापन के संबंध में ।
प्रसंग :- विभागीय पत्रांक-5329 दिनांक-25.10.2019

महाशय,

उपर्युक्त विषय के संदर्भ में कहना है कि निम्नलिखित T.D. जो आपके डाकघर से निर्गत होने के पश्चात् अधोहस्ताक्षरी के पदनाम से प्रतिज्ञिप्त है, जिसे प्रतिभूति के रूप में जमा की गई है जिसे सत्यापित कर यथाशीघ्र हाथों-हाथ लौटाने की कृपा की जाय ताकि अग्रेतर कार्रवाई की जा सकें। सत्यापन हेतु इस कार्यालय में कार्यरत निम्नवर्गीय लिपिक, ग्रामीण कार्य विभाग, कार्य प्रमंडल, त्रिवेणीगंज को प्राधिकृत किया जाता है।

काय प्रमडल, त्रिवेणीगज का प्राधिकृत किया जाता है।

Sl. No.	Name of Agency	Name of Road	T.D. No.	Date of Issue	Amount	Remarks
1	Harekrishna Lal Das Ward no-1, Supaul.	PMGSY Road Shyamnagar Triveniganj	3688815652	22.06.2017	70000.00	
2		Ghuttar Yadav	3870268952	29.12.2017	42000.00	
3		Ghar Se Maheshua ward No-14 Antim Tola	3688822605	22.06.2017	74000.00	
Total					186000.00	

अनु० :- यथोक्त।

Above signed by 01/03/2020
Verified & found correct

19.02.2020
Sub-Postmaster
Supaul Bazar
852131

विश्वासभाजन

कार्यपालक अभियंता
ग्रामीण कार्य विभाग
कार्य प्रमंडल, त्रिवेणीगंज
07.02.2020

General Insruction

1. Passbook is a record of transactions for the information of the depositor and balance shown in it cannot be claimed legally.
2. It is the duty of the depositor to confirm balance shown in the passbook from the concerned post office and post office is legally liable to pay the amount actually available in its record.
3. Always take a printed receipt from the post office when you hand over the passbook to the post office for any purpose.
4. Always keep the passbook in your personal custody and post office will not be responsible for any loss of money in case passbook is handed over to any other person.
5. Do not keep specimen signatures in the passbook.
6. Check balance after transaction written in the passbook and contact postmaster immediately in the case of any discrepancy.
7. In case of loss of passbook, report the matter in writing to the postmaster immediately.
8. Intimate change of address if any to the postmaster.
9. Do not hand over blank signed withdrawal forms to any person including authorized agents.
10. Do not appoint postmasters or authorised agents as messengers for withdrawals of money from your account.

Photograph

जमाकर्ता का नाम
Depositor(s) Name

1. 82 कृष्ण मिश्र

Mandatory
For SCSS 2004

2. 29-12-2017

3. 29-12-2017

पता/Address

915 10th Street

Date of Birth

Name of Parent /Guardian

(in case of minor)

जारी करने की तारीख

Date of Issue

खाते का प्रकार

Account Type

खाता/Account No.

Pan No.

पोस्टमास्टर
के हस्ताक्षर

नामांकन
की संख्या

रजिस्ट्री की तारीख

Signature of
Postmaster

Nomination
Number

Date of
Registration

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Photograph

जमाकर्ता का नाम
Depositor(s) Name

1. Hare Krishna Das

Mandatory
For SCSS 2004

2. 29-12-2017

3. 29-12-2017

पता/Address

Word No-01

Date of Birth

Name of Parent /Guardian

(in case of minor)

जारी करने की तारीख

Date of Issue

खाते का प्रकार

Account Type

खाता/Account No.

Pan No.

पोस्टमास्टर
के हस्ताक्षर

नामांकन
की संख्या

रजिस्ट्री की तारीख

Signature of
Postmaster

Nomination
Number

Date of
Registration

तारीख
Date

लेन देन का विवरण/दिनांकित मोहर (यदि पासबुक प्रिन्टर काम
नहीं कर रहा है और प्रविष्टि मैनुअल रूप से की गई है।)
Particulars of Transactions/Date Stamp (in case passbook
printer is not in use and entry made manually)

22.06.17 (Rs Seventy four thousand of)

E.E.R.W.D. Div.
Bikaner
729 - 20/06/17
22/6/17

(2)

जमा
Deposit/
Credit

निकासी
Withdrawal/
Debit

बकाया
Balance

स.ह.
Initial

74000-

74000- *[Signature]*

(3)

तारीख
Date

लेन देन का विवरण/दिनांकित मोहर (यदि पासबुक प्रिन्टर काम
नहीं कर रहा है और प्रविष्टि मैनुअल रूप से की गई है।)
Particulars of Transactions/Date Stamp (in case passbook
printer is not in use and entry made manually)

29¹²/2017
Sep 26th (forty two thousand)
only.

E.E.R.W.D. Div.
Bikaner
729 - 20/06/17
29/9/17

(2)

जमा
Deposit/
Credit

निकासी
Withdrawal/
Debit

बकाया
Balance

स.ह.
Initial

42000=10 — 42000=10 *[Signature]*

(3)

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Photograph

जमाकर्ता का नाम
Depositor(s) Name

Mandatory
For SCSS 2004

पता/Address

Date of Birth

Name of Parent /Guardian

(in case of minor)

जारी करने की तारीख

Date of Issue

खाते का प्रकार

Account Type

खाता/Account No.

Pan No.

(for SCSS - 2004 only)

पोस्टमास्टर
के हस्ताक्षर

नामांकन
की संख्या

रजिस्ट्री की तारीख

Signature of
Postmaster

Nomination
Number

Date of
Registration

118

0202

1. र. सुधा माता 314
2. ग. र. न. 01
3. मु. 11

पता/Address ग. र. न. 01
मु. 11

Date of Birth 22.06.17

Name of Parent /Guardian ग. र. न. 01

(in case of minor) ग. र. न. 01

जारी करने की तारीख 22.06.17

Date of Issue 22.06.17

खाते का प्रकार TD 34-ent

Account Type TD 34-ent

खाता/Account No. 3688815659

Pan No. 3688815659

(for SCSS - 2004 only)

पोस्टमास्टर नामांकन रजिस्ट्री की तारीख
के हस्ताक्षर की संख्या

Signature of 44487739
Postmaster

Nomination 44487739
Number

Date of 44487739
Registration

तारीख
Date

लेन देन का विवरण/दिनांकित मोहर (यदि पासबुक प्रिन्टर काम नहीं कर रहा है और प्रविष्टि मैनुअल रूप से की गई है)
Particulars of Transactions/Dale Stamp (in case passbook printer is not in use and entry made manually)

22.06.17 (Rs Seventy thousand only)

E.F.R. W.D. W.D. W.D.
T.M. Vaniya
729-20-17
22/6/17

जमा
Deposit/
Credit

निकासी
Withdrawal/
Debit

बकाया
Balance

म.ह.
Initial

70,000 -

70,000 +
22/6/17