



Merchant Payment request accepted and successful.

Please note the Reference ID: 572748365 for future communication.

E-RECIPT FOR
MERCHANT PAYMENT

| | |
|---------------------|--------------------------------------|
| Reference ID | 572748365 |
| Debit Account | 912010014093916 |
| Transaction Tag | 483 BGMRD0024651000 CONT 211 Aug2018 |
| Frequency Type | One Time |
| Transaction Date | 09/15/2018 |
| Payee Name | EPFO PAYMENT AXIS BANK |
| Amount | ₹ 4,69,647.00 |
| Requested By | KSIT.SRNAIDU |
| Requested Date | 15-09-2018 10:57:18 |
| Transaction Remarks | - |
| TRRN | 4831809002822 |
| CRN | 211150918000353 |
| Credit Account | 917020053501346 |

Please check the transaction status using 'Transaction status Enquiry' before re-initiating a fresh payment.



भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

समूह एवं अधिवर्षिता विभाग
Pension and Group Schemes Unit

R 12353

संश्लेषण क्रमांक - Division Code

दिनांक - Date

सीट क्रमांक - Receipt No 0817G501

समय - Time 17/09/2018

11105

BANGALORE (G501)

4TH FLOOR,

"JEEVAN PRAKASH", BLDGS,

JC ROAD, इग

BANGALORE

560002

प्राप्त निधि के लिए ग्राहक-सेवा प्राप्त

Received with thanks Rs.

से - From

DEPOSIT MEMORANDUM

towards the following

2350.00

CHEQUE

NO OF INSTR

M/S K S INSTITUTE OF TECHNOLOGY

Policy No :- GSII 522988

Being the amount held in deposit for the above policy

(Two Thousand Three Hundred Fifty Only)

M/S K S INSTITUTE OF TECHNOLOGY

NO 14,

RAGHUVANAHALLI

KANAKAPURA ROAD, BANGALORE

वेतन वृद्धि के लिए जारी की गयी सीट चेक की रकम मिलने पर वैध होगी।

Receipt of payment Authority

subject to realisation of cheque

Protection shall only be provided effective from the date of acceptance of risk)

560062

PAYMENT UNDER YOUR POLICY, PLEASE SUBMIT NEFT MANDATE FORM. THIS IS MANDAT

Details of Cheques Received (subject to Realisation)

15939603/09/2018) T I Bank Ltd BLOREE 2350.00

हस्ताक्षर

Signature



Merchant Payment request accepted and successful.

Please note the Reference ID: 572747696 for future communication.

E-RECIPT FOR
MERCHANT PAYMENT

| | |
|---------------------|---------------------|
| Reference ID | 572747696 |
| Debit Account | 912010014093916 |
| Transaction Tag | MOPSESIK |
| Frequency Type | One Time |
| Transaction Date | 09/15/2018 |
| Payee Name | ESIC(BILLDESK) |
| Amount | ₹ 59,758.00 |
| Requested By | KSIT.SRNAIDU |
| Requested Date | 15-09-2018 10:49:46 |
| Transaction Remarks | - |
| Additional Remarks | NAXC6683674946 |
| Credit Account | 100012910524 |

Please check the transaction status using 'Transaction status Enquiry' before re-initiating a fresh payment.



UNITED INDIA INSURANCE COMPANY LIMITED

NO. 40, LAKSHMI COMPLEX, K.R. ROAD, FORT BANGALORE
BANGALORE - 560002 KARNATAKA
PH: (80) 26700977 FAX: (80) 26700978 EMAIL

GROUP PERSONAL ACCIDENT POLICY
POLICY NO.:0730014218P111735519

PERIOD OF INSURANCE
From 16:00 Hrs of 11/12/2018
To Midnight of 10/12/2019

Insured

MS K.S.INSTITUTE OF TECHNOLOGY
NO 14,RAGHUVANAHALLI,KANAKAPURA ROAD,BANGALORE
560062
BANGALORE RURAL
KARNATAKA

IMPORTANT NOTICE KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : RAMANNA V R
Agent Code : AGI0022180
Mobile/Landline Number/Email : 9341231336
: ramanna.leelavathi@gmail.com

LET US JOIN THE FIGHT AGAINST CORRUPTION.
PLEASE TAKE THE PLEDGE AT <http://pledge.cvs.aisc.in>

For any Information, Service Requests, Claim intimation and Grievances please write to 073001@mic.co.in

REGD. & HEAD OFFICE 24, WHITES ROAD, CHENNAI - 600014
Website: <http://www.aisc.co.in>

Printed By : SRI31286 @ 11/12/2018 3:54:25 PM



UNITED INDIA INSURANCE COMPANY LIMITED

RECEIPT

| | | | |
|--------------------------------|---|--------------------|----------------------|
| Issuing Office code Address | 073001 BO CHICKPET NO 40, LAKSHMI COMPLEX K R ROAD, FORT 560002 | Receipt Number | 10107300118112137602 |
| | | Collection Date | 11-12-2018 |
| | | | |

Received with thanks from K S INSTITUTE OF TECHNOLOGY (Customer ID 23012121769 Customer GST UIN No Not Available) a sum of Rs. 16,346.00 (Sixteen thousand three hundred forty-six rupees only) as per detail given hereunder

| Sl. No | Policy Number | Policy Type | Endr Ren C In Decln No | Particulars | Total Amount |
|--------|----------------------|-------------------------|------------------------|------------------------------|------------------|
| 1 | 0730014218P111735519 | Group Personal Accident | 0 | Final Premium | 13,852.00 |
| 2 | 0730014218P111735519 | Group Personal Accident | 0 | CGST | 1,247.00 |
| 3 | 0730014218P111735519 | Group Personal Accident | 0 | SGST | 1,247.00 |
| | | | | Total (Rounded Off) : | 16,346.00 |
| | | | | Stamp Duty : | 0.00 |
| | | | | Bank Charges : | 0.00 |
| | | | | Total Amount : | 16,346.00 |

| Instrument Details | | | | | | | |
|--------------------|--------------------|-----------------|-------------------|-----------------|---------------|-----------------------|---------------|
| Sl. No | Payment ID | Mode of Payment | Instrument Number | Instrument Date | Bank Name | Branch Name | Tagged Amount |
| 1 | 118073001107626114 | CHEQUE | 159600 | 11-12-2018 | AXIS BANK LTD | J P NAGAR, 6 TH PHASE | 16,346.00 |

Particulars
GSTIN (UIC) : 29AAACU5552C1ZF

for UNITED INDIA INSURANCE COMPANY LIMITED

Cashier Initial

Note

1. Receipt valid subject to realisation of cheque
2. Please quote policy no., collection no., and date in all correspondences




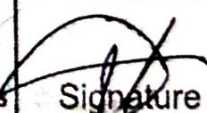
Chq: B. RAMANA REDDY

CASH BILL
SUPREEM TAILORS

Naidu Layout, Kakateeya Nagar, Ittamadu, Bangalore-61

No. **699** Date: **09.11.18**


Name: **K.S.I.T**

| Sl. No. | PARTICULARS | Qty. | Rate. | Amount | |
|---------|--|-----------|------------|---|-----|
| | | | | Rs. | Ps. |
| | Dress's Suit Safari Pant Shirt F / H - Cloths | 38 | 750 | 28,500 | |
| |  | | | | |
| | | | | Total | |
| | | | | Advance | |
| | | | | Balance | |
| | No. Credit / No Bargain | | | TOTAL 28,500 | |
| | *Date of Delivery On.....after 6-00 p.m | | | Signature  | |
| | *Produce this bill at the time of delivery | | | | |
| | *We are not responsible for any Damage / Loss after two Months | | | | |

RECEIPT DETAILS

CHQ/VR No: **15957001** **23.11.18**

AMOUNT Rs **28,500/-**

 SECRETARY

TREASURER