

CHALLAN FORM
T. R. FORM No 6 (N.B: S . R 37)

1st (Main) Copy	2nd Copy	3rd Copy
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Challan No : _____ Date : _____

Challan for the Deposit of money in the Branch of _____ of District _____ of Bangladesh Bank /Sonali Bank

CODE No:

TO BE FILLED IN BY THE DEPOSITOR				Amount of money		Name of Division and Name ,Designation and department of endorsement Officer of Challan.
Name and address by which the money is deposited.	Name , designation and address of the Person / Institution for which money has been deposited.	Description for what purpose the money has been deposited.	Description of Cion & Note / Draft, Pay-order & Cheque	Taka	Paisa	
				Total Taka		
Taka (In Word)				Manager Bangladesh Bank /Sonali Bank		
Money Received						
Date:						

NOTE: 1. Please ensure the exact Code by contacting with the respective Department, if necessary.
2 * Endorsement is applicable for those cases only where it is necessary by an Officer.