

MANDATE FORM ISSUED FOR COLLECTION OF EXAMINATION FEE AND COURSE FEE FROM M.Sc BIostatistics I & II Year Students for the Academic Year 2019-20/2020-21

ELECTRONIC CLEARING SERVICE (CREDIT CLEARING) REAL TIME GROSS SETTLEMENT (RTGS) FACILITY FOR RECEIVING PAYMENTS

A DETAIL OF ACCOUNT HOLDER:

SL.NO.	PARTICULARS	DETAILS
01.	NAME OF THE ACCOUNT HOLDER	DIRECTOR, NIE ✓
02.	COMPLETE CONTACT ADDRESS	R-127, TNHB, AYAPAKKAM, CHENNAI – 600 077.
03.	TELEPHONE NUMBER/FAX/EMAIL	nieaccounts@gmail.com ✓
04.	NAME & ADDRESS OF PROJECT INVESTIGATOR/FIRM	Dr. M.V. Murhekar Scientist 'G' & Director, ICMR - National Institute of Epidemiology, R-127, TNHB, Ayapakkam, Chennai – 600 077.

B BANK ACCOUNT DETAIL:

SL.NO.	PARTICULARS	DETAILS
01.	BANK NAME	CANARA BANK
02.	BRANCH NAME WITH COMPLETE ADDRESS, TELEPHONE NUMBER AND EMAIL	AMBATTUR BRANCH, CHENNAI
03.	WHETHER THE BRANCH IS COMPUTERISED?	YES
04.	WHETHER THE BRANCH IS RTGS ENABLED? IF YES, THEN WHAT IS THE BRANCH'S IFSC CODE	YES, CNRB0000936
01.	IS THE BRANCH ALSO NEFT ENABLED?	YES
02.	TYPE OF BANK ACCOUNT (SB/CURRENT/CASH CREDIT)	CURRENT ACCOUNT
03.	COMPLETE BANK ACCOUNT NUMBER (LATEST)	0936201002864
04.	MICR CODE OF BANK	600015004

I hereby declare that the particulars given above are current and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information I would not hold the user Institution responsible.

Jaya Kumar 13/08/2020

(Signature of Accounts Officer of the Institute)

Date : 13/08/2020

Certified that the particulars furnished above are correct as per our records