

SB/CQE-4(a)

DEPARTMENT OF POSTS

Requisition for fresh cheque book for Savings Account

NB : As a safeguard against fraud, application for a fresh cheque book must be made on this form only by the depositor(s)

To _____ Dated

The Post Office Saving Bank Post Office

- 1 Please issue a fresh cheque book for my/our Savings Account No..... standing open at your office
- 2 The cheque book should be delivered/sent by post to :-

Name
Full Address
.....
.....

Signature(s) of Depositors

TO BE FILLED IN BY THE POST OFFICE

Cheque Book containing
..... cheques issued

Received cheque book
containing cheques

Noted in ledger/ledger card of Account No.....

No..... to

Initials with date
of Postmaster

Signature of
Depositor/Messenger