



REGIONAL OFFICE, DELHI
CENTRAL BOARD OF SECONDARY EDUCATION
(AN AUTONOMOUS ORGANISATION UNDER THE UNION MINISTRY OF HUMAN RESOURCE DEVELOPMENT)
(GOVT. OF INDIA)
PS-1-2, INSTITUTIONAL AREA, I.P. EXTENSION, PATPARGANJ, DELHI -110092.

CBSE/ROD/B&C/2009

01.02.2010

To

Foreign Centre Superintendent/Custodian/CNS/Observers

Subject: Payment through SWIFT

Sir/Madam

The Competent Authority of the Board has approved making payment through Society for World Wide International Financial Transaction (SWIFT) for all the payments relating to Examination 2010 onwards. Hence, if you desire to receive the payment of Centre Charges/Freight Charges/Custodian Charges/Evaluation Charges/Observer charges through SWIFT (under which the amount will be directly credited into your account) then, the SWIFT Mandate form enclosed with this letter may please be duly filled up in duplicate and duly certified by the authorized official of your Bank and be sent back to us.

Kindly send the information immediately so as to enable us to take further action in this regard.

Thanking you,

Yours faithfully

(NEELAM GAUTAM)
SR. ACCOUNTS OFFICER, ROD

Encl: As above

Society for Worldwide International Financial Transfer (SWIFT) Mandate Form

(Mandate for receiving payment through SWIFT from Central Board of Secondary Education)

(To be filled in duplicate)

1	Name	
2	CNS/Centre Superintendent/ Observer/Custodian Number	
3	Permanent Account Number (PAN)	
4	Particulars of Bank Account	
	a. Account No (for Credit)	
	b. Account Type (Saving/Current/Overdraft)	
	c. Name of the Bank	
	d. Name of the Branch	
	e. Address	
	f. Branch Code	
	f. SWIFT Code of the Bank	
5	E-mail ID	
6	Contact No	
7	Date of effect	

(Please enclose a photocopy of the cancelled cheque to enable us to verify the details mentioned above)

We hereby declare that the particulars given above are correct and complete. If the transaction is delayed or lost because of incomplete or incorrect information, we would not hold the Board responsible.

Signature of the
CNS/Centre Superintendent/Observer/Custodian

Bank Certificate

We certify that _____ has an Account No. _____ with us and we confirm that the details given above are correct as per our records.

Date :

Place :

Authorized Official of Bank

To be filled in by Board

Name of Remitter	CBSE
Account No (for debit)	
Account Type	Current
Remittance Details	
Amount (Rs. in figures)	
Amount (Rs. in words)	
Remarks/narration	