Bank details for receiving payments through electronic mode
(To be filled up in CAPITAL LETTERS)

EMPLOYEE ID NO. ----------

1. NAME OF ACCOUNT HOLDER

2. COMPLETE ADDRESS WITH PIN CODE

P I N

3. TELEPHONE NO. (WITH STD CODE)

4. MOBILE NUMBER

5. E-MAIL

6. BANK NAME

7. BANK BRANCH NAME

8. BANK BRANCH ADDRESS

P I N

9. COMPLETE ACCOUNT NUMBER

10. IFSC CODE OF BANK BRANCH

11. 9-DIGIT MICR CODE OF BRANCH

(i) I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information. I would not hold the disbursing authority responsible.

(ii) I hereby authorize the Rajya Sabha Secretariat to remit my all payments directly into my bank account.

(SIGNATURE)

NAME AND DESIGNATION _____