




Learner's Copy		KSLMA Copy		Bank Copy	
 STATE BANK OF INDIA		 STATE BANK OF INDIA		 STATE BANK OF INDIA	
Branch:		Branch:		Branch:	
Please credit the amount to the account of KERALA STATE LITERACY MISSION AUTHORITY ACCOUNT No. <b>38444973881</b> with SBI Sasthamangalam (IFSC - SBIN0070023), Thiruvananthapuram		Please credit the amount to the account of KERALA STATE LITERACY MISSION AUTHORITY ACCOUNT No. <b>38444973881</b> with SBI Sasthamangalam (IFSC - SBIN0070023), Thiruvananthapuram		Please credit the amount to the account of KERALA STATE LITERACY MISSION AUTHORITY ACCOUNT No. <b>38444973881</b> with SBI Sasthamangalam (IFSC - SBIN0070023), Thiruvananthapuram	
<b>Name of Certificate Course: Good English</b>		<b>Name of Certificate Course: Good English</b>		<b>Name of Certificate Course: Good English</b>	
Name of Learner:		Name of Learner:		Name of Learner:	
<b>Purpose of Remittance</b>	Amount Rs.	<b>Purpose of Remittance</b>	Amount Rs.	<b>Purpose of Remittance</b>	Amount Rs.
Registration Fee		Registration Fee		Registration Fee	
Course Fee		Course Fee		Course Fee	
Bank Commission	20	Bank Commission	20	Bank Commission	20
<b>Total</b>		<b>Total</b>		<b>Total</b>	
Name and address of Learner:		Name and address of Learner:		Name and address of Learner:	
Phone/Mobile Phone No.		Phone/Mobile Phone No.		Phone/Mobile Phone No.	
Signature of Learner:		Signature of Learner:		Signature of Learner:	
<b>For Bank Use</b>		<b>For Bank Use</b>		<b>For Bank Use</b>	
Received Rs..... (Rupees.....)		Received Rs..... (Rupees.....)		Received Rs..... (Rupees.....)	
Journal No.		Journal No.		Journal No.	
Cashier	Manager	Cashier	Manager	Cashier	Manager