

GATEWAY PLAZA 95

RECEIPT

RECEIPT NO _____ RECEIPT DATE _____ PAYMENT MODE _____

CUSTOMER ID	_____	INSTRUMENT NO	_____
CUSTOMER	_____	INSTRUMENT DATE	_____
NAME			
S/O	_____	DRAWN ON	_____
CO-APPLICANT	_____		_____
ADDRESS	_____	RECEIVED DATE	_____
AREA	_____		_____
UNIT NO.	_____		_____

SNO	PARTICULARS	COSTHEAD	AMOUNT
		BSP	
		BSP	
TOTAL			

IN WORDS : RUPEESONLY

FOR SULUTREAN BULDING TECHNOLOGIES PRIVATE LIMITED

AUTHORIZED SIGNATORY

Note: *This Receipt is subject to the realisation of the Cheque / DD

***Please mention your Booking No. Name and Phone no. on back of the Cheque / DD**

***Please make payment before due date to avoid interest.**

***Cheque bounce charges will be Rs. 500/- Plus GST**

***GST No:** _____

***RERANO:** _____