

Cash Management Product
Cash/Cheque Deposit Slip

Branch _____ Code No. _____

Credit the Account: **MAX BUPA HEALTH INSURANCE COMPANY LIMITED**

Following information is mandatory, depositor & Axis Bank Teller to ensure that all the fields are filled in

Max Bupa Customer's Name	<input type="text"/>
Max Bupa Customer's Contact#	<input type="text"/>
Application#	<input type="text"/>
Customer ID	<input type="text"/>
Policy#	<input type="text"/>
Depositor Name	<input type="text"/>
Depositor's Contact#	<input type="text"/>
Cheque#	<input type="text"/> Amount <input type="text"/>
Bank & Branch	<input type="text"/>

Denomination	Nos.	Rupees
1 0 0 0 X		
5 0 0 X		
1 0 0 X		
5 0 X		
2 0 X		
1 0 X		
5 X		
2 X		
1 X		
Total		

Depositor's Sign

Amount in words (Rupees) _____

~~~~~

**(Cheque/Cash Receipt Acknowledgment by Axis Bank)**

Branch \_\_\_\_\_ Code No. \_\_\_\_\_

Credit the Account: **MAX BUPA HEALTH INSURANCE COMPANY LIMITED**

**Following information is mandatory, depositor & Axis Bank Teller to ensure that all the fields are filled in**

|                                    |                                                               |
|------------------------------------|---------------------------------------------------------------|
| Max Bupa Customer's Name           | <input type="text"/>                                          |
| Max Bupa Customer's Contact#       | <input type="text"/>                                          |
| Application#                       | <input type="text"/>                                          |
| Customer ID                        | <input type="text"/>                                          |
| Policy#                            | <input type="text"/>                                          |
| Depositor Name                     | <input type="text"/>                                          |
| Depositor's Contact#               | <input type="text"/>                                          |
| Mode (Tick whatever is applicable) | Cash <input type="checkbox"/> Cheque <input type="checkbox"/> |
| Cheque#                            | <input type="text"/> Amount <input type="text"/>              |
| Bank & Branch                      | <input type="text"/>                                          |

Amount in words (Rupees) \_\_\_\_\_

|                                       |
|---------------------------------------|
| <b>Cashier Signatures &amp; Stamp</b> |
|                                       |