

From:

Ph. No. _____

Dated. _____

To,
The Director,
Directorate of Small Savings & Lotteries,
Altinho, Panaji, Goa.

Sub: Business details of PPF Agency No. _____

For the month of _____

Sir,

I hereby submit the monthly report for the above mentioned month as follows:

Sr. No.	Name of Depositor	Accounts No.	Date of Issue	Amount	Commission received by the Agent	TDS deducted by bank/post office
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Thanking you.

Yours faithfully,

(_____)

Signature of the Post Master/Bank Manager.
Seal.