




 <p style="text-align: center;">Pakistan Testing Service</p> <p style="text-align: center;">BANK DEPOSIT SLIP (PTS Copy)</p>	
Branch Code: _____	Date: _____
Branch Name: _____	Project Code / (Dealer Code) 115
EXCISE, TAXATION & NARCOTICS CONTROL DEPARTMENT	


 <p style="text-align: center;">Pakistan Testing Service</p> <p style="text-align: center;">BANK DEPOSIT SLIP (Candidate Copy)</p>	
Branch Code: _____	Date: _____
Branch Name: _____	Project Code / (Dealer Code) 115
EXCISE, TAXATION & NARCOTICS CONTROL DEPARTMENT	


 <p style="text-align: center;">Pakistan Testing Service</p> <p style="text-align: center;">BANK DEPOSIT SLIP (Bank Copy)</p>	
Branch Code: _____	Date: _____
Branch Name: _____	Project Code / (Dealer Code) 115
EXCISE, TAXATION & NARCOTICS CONTROL DEPARTMENT	


 <p style="text-align: center;">Habib Bank Limied</p>	
A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA	AC# : 0042-79916572-03

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 <p style="text-align: center;">United Bank Limited</p>	
A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA	A/C #: 225701041

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A/C Title: Pakistan Testing Service (Pvt) Ltd-MCA	A/C #: 225701041

Note: 1.Desired Bank Stamp is required on the Deposit Slip or attach electronic receipt with deposit Slip.
2. Send Original Deposit Slip (PTS Copy) to PTS Office within due date.

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Note: 1.Desired Bank Stamp is required on the Deposit Slip or attach electronic receipt with deposit Slip
2. The Bank Must Return "PTS Copy" to the Candidate.

Applicant's Name / (PLAN / PRODUCT CODE):	
Father Name:	
Contact No:	
CNIC No/ B Form No / PV# :	
Position (Applied For):	
Deposit Amount :	
Test Fee (inclusive of all govt Tax)	Rs. 285
Amount in words: Rs.	Two Hundred Eighty Five Rupees only Non Refundable/ Non Transferable
Applicant Signature	Cashier

Applicant's Name / (PLAN / PRODUCT CODE):	
Father Name:	
Contact No:	
CNIC No/ B Form No / PV# :	
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Deposit Amount :	
Test Fee (inclusive of all govt Tax)	Rs. 285
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Postal Address: Pakistan Testing Service
PTS Head Quarters , 3rd Floor, Adeel Plaza, Fazl-e-Haq Road, Blue Area, Islamabad.

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