**Date:-**

**PFMS Mandate Form**

|  |  |  |
| --- | --- | --- |
| **Sr. No** | **Details Required** | **Information** |
| **1** | **Name of Vendor/Supplier** |  |
| **2** | **Date Of Birth / Date of Incorporation** |  |
| **3** | **Father/Husband Name** |  |
| **4** | **Aadhaar Number**  |  |
| **5** | **GST No** |  |
| **6** | **PAN No** |  |
| **7** | **Complete Address** |  |
| **8** | **City** |  |
| **9** | **Country** |  |
| **10** | **State** |  |
| **11** | **District** |  |
| **12** | **PIN Code** |  |
| **13** | **Mobile No.** |  |
| **14** | **Telephone No.** |  |
| **15** | **E Mail Address** |  |
| **16** | **Account Holder Name** |  |
| **17** | **Bank Name** |  |
| **18** | **Bank (Branch)** |  |
| **19** | **Bank Address** |  |
| **20** | **Account No.** |  |
| **21** | **IFSC Code** |  |
| **22** | **Swift Code** |  |

I/We hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information I/we would not hold the user Institution responsible.

 **Name:**

 **Stamp/Seal &Signature of Vendor/Supplier:**