Annex II

(Paragraph 5)

Consolidated Monthly Reporting for the month of _____

- 1. Name of the Bank / District:
- 2. Name and Address of the Nodal Officer:
- 3. Detail of counterfeit notes

Date of	Name of branch /	Denominations /	Security features
detection	currency chest	pieces / serial	breached
		numbers	

- 4. The counterfeit notes are enclosed herewith,
- 5. Kindly acknowledge receipt.

(Authorised signatory)

Encl: