

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

4. The counterfeit notes are enclosed.
5. Kindly acknowledge receipt.

(Authorised signatory)

Encl: