

Subject: OD REFERRALS (06-02-2017) A/c # [REDACTED]

Classification: **For internal use only**

Hi Team,

Please find the attached OD Referral for today and approve these with your decision hand-written on the OD referral form with two signatures (mandatory).

Please provide the below information on the form –

- Ok to pay / Not Ok to pay,
- Charge / Waive OD fee decision, and
- Reason on how and when the OD will be covered.

Kind regards,
Shalini Goyal



Shalini Goyal
Analyst | Banking Transactions

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Please send all the Banking related Queires to our new Group E-mail ID
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