

KSPHC Ltd.	Format for EMD Refund Register	F: 17- 8 Rev No. Page 1 of 1
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SL No	Name of Agency	Name of work	Amount	Particulars of DDs Sent to CAO / Returned to unsuccessful tenderers		Acknowledgement
				DD No. / date	Bank / branch	of the receiver

Accts. Suptd.

EE(QC) / EE