**TAMIL NADU HOMOEOPATHY MEDICAL COUNCIL, CHENNAI.**

**Arignar Anna Govt.Hospital Campus, Arumbakkam, Chennai – 600 106**

 **044-26286458**

**Account Details**

|  |  |
| --- | --- |
| **Name** | **The Registrar** |
| **Bank** | **State Bank of India** |
| **Branch** | **Razack Garden, Arumbakkam, Chennai -600 106** |
| **Account Type** | **Savinga Bank A/c** |
| **Account Number** | **10144208864** |
| **IFSC Code** | **SBIN0006495** |

 