

Cashier Copy



**Excël® GROUP INSTITUTIONS**  
PERIYAR UNIVERSITY - SALEM  
Exam Fees Challan

Challan No.: ..... Date: .....

College Name: \_\_\_\_\_

Name of the Student: \_\_\_\_\_

Roll. No.: \_\_\_\_\_

Reg. No.: \_\_\_\_\_

Department of: \_\_\_\_\_

Year / Semester: \_\_\_\_\_

Month & Year of Exam: \_\_\_\_\_

Denomination	
2000 x _____	
500 x _____	
200 x _____	
100 x _____	
50 x _____	
20 x _____	
10 x _____	
<b>Total</b>	

Received the sum of Rs. \_\_\_\_\_

Signature of the Cashier

Exam Cell Copy Through Class Advisor



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PERIYAR UNIVERSITY - SALEM  
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200 x _____	
100 x _____	
50 x _____	
20 x _____	
10 x _____	
<b>Total</b>	

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Student Copy



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500 x _____	
200 x _____	
100 x _____	
50 x _____	
20 x _____	
10 x _____	
<b>Total</b>	

Received the sum of Rs. \_\_\_\_\_

Signature of the Cashier

No. of Regular Papers:	*85	
No. of Arrear Papers:	*85	
No. of Practical:	*100	
Marks Statement Fee: Rs.100/- Marksheet		100
Application Fee:		50
Project Work:		
Degree Certificate:		
Alumini Fees:		
Internal Exam, Processing and other fees:		250
<b>Total Amount</b>		

5

Total Amount in words \_\_\_\_\_

Signature of Student

Signature of Class advisor

HOD

Seal

No. of Regular Papers:	*85	
No. of Arrear Papers:	*85	
No. of Practical:	*100	
Marks Statement Fee: Rs.100/- Marksheet		100
Application Fee:		50
Project Work:		
Degree Certificate:		
Alumini Fees:		
Internal Exam, Processing and other fees:		250
<b>Total Amount</b>		

Total Amount in words \_\_\_\_\_

Signature of Student

Signature of Class advisor

HOD

Seal

No. of Regular Papers:	*85	
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Marks Statement Fee: Rs.100/- Marksheet		100
Application Fee:		50
Project Work:		
Degree Certificate:		
Alumini Fees:		
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<b>Total Amount</b>		

Total Amount in words \_\_\_\_\_

Signature of Student

Signature of Class advisor

HOD

Seal