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Branch Name: _____

Branch Code: _____



**VIKRAMA SIMHAPURI UNIVERSITY
KAKUTUR - 524 320**

EXAMINATIONS FEE PAYMENT CHALLAN

Date: _____

A/c No. **106810100000070**, Registrar,
Vikrama Simhapuri University, Nellore, A.P.

Name of the College: _____

Fee Details: Put up [v] mark

Course : UG /PG /MBA /MCA /B.Ed /M.Ed/Ph.D/M.P.Ed

Nature of Fee : Exam Fee/ RV/ OD/ Other Fee

Amount of Rs : _____

No.of Students : _____

Signature

[To be filled by Bank]

Fee Details:

Challan No : _____

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***1. Please enter Tran.ID/ Journal No. on all challans.**

***2. Please enter the Course and Nature of fee in the menu while posting.**

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