UG	PG

EXAM FEE CHALLAN No: _____ DATE: _____

K.S.RANGASAMY COLLEGE OF ARTS AND SCIENCE (AUTONOMOUS)
TIRUCHENGODE – 637 215

Exam A/C No: 0751302000000236

Name of the Staff: _____

Branch: _____ Year: _____ Section: _____

S.NO.	REGISTER NUMBER	NAME OF THE STUDENT	AMOUNT (Rs.)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
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21.			
22.			
23.			
24.			
25.			
		TOTAL	

Denomination: Rs.

500 X	
200 X	
100 X	
50 X	
20 X	
10 X	
05 X	
Coins	
Total	

Office Use
Cash Received by

Signature of the Faculty

HoD

Rupees in words_____