



C.U EXAMINATION FEES PAYMENT

Candidate Details

Full Name of Candidate

SONAL SHARMA

University Roll Number

212213-12-0202

University Registration Number

213-1211-0841-21

Select Semester

4th Semester

Select Exam Type

Regular Exam Fees

Additional Details

Mobile Number

+917439071695

Email Address

sharmasonal7439@gmail.com

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Product	Qty	Unit Price	Price
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