



## C.U EXAMINATION FEES PAYMENT

### Candidate Details

#### Full Name of Candidate

SARITA DAS

#### University Roll Number

232213-12-0225

#### University Registration Number

213-1212-0690-23

#### Select Semester

2nd Semester - CCF

#### Select Exam Type

Regular Exam Fees

### Additional Details

#### Mobile Number

+918910258884

#### Email Address

[saritakumaridas26@gmail.com](mailto:saritakumaridas26@gmail.com)

### Order

Product	Qty	Unit Price	Price
CU Examination Fees	1	₹400.00	₹400.00
		<b>Total</b>	<b>₹400.00</b>