



C.U EXAMINATION FEES PAYMENT

Candidate Details

Full Name of Candidate

Shrabani Basak

University Roll Number

212213-12-0242

University Registration Number

213-1211-0885-21

Select Semester

2nd Semester - CBCS

Select Exam Type

Supply Exam Fees

Additional Details

Mobile Number

+919330306178

Email Address

shrabanibasak20@gmail.com

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