



Maharani Kasiswari College

C.U EXAMINATION FEES PAYMENT

Candidate Details

Full Name of Candidate

RINKI BARUI

University Roll Number

232213-11-0151

University Registration Number

213-1211-0061-23

Select Semester

2nd Semester - CCF

Select Exam Type

Regular Exam Fees

Additional Details

Mobile Number

+919875693852

Email Address

rinkibarui225@gmail.com

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