



## C.U EXAMINATION FEES PAYMENT

### Candidate Details

#### Full Name of Candidate

SAHELI AICH

#### University Roll Number

221213-11-0128

#### University Registration Number

213-1211-0561-22

#### Select Semester

5th Semester

#### Select Exam Type

Regular Exam Fees

### Additional Details

#### Mobile Number

+918100168267

#### Email Address

[saheliaich6@gmail.com](mailto:saheliaich6@gmail.com)

### Order

Product	Qty	Unit Price	Price
CU Examination Fees	1	₹355.00	₹355.00
		<b>Total</b>	<b>₹355.00</b>