



# Maharani Kasiswari College

## C.U EXAMINATION FEES PAYMENT

### Candidate Details

**Full Name of Candidate**

LIZA GHOSH

**University Roll Number**

232213-12-0098

**University Registration Number**

213-1211-0611-23

**Select Semester**

3rd Semester

**Select Exam Type**

Regular Exam Fees

### Additional Details

**Mobile Number**

+917439956504

**Email Address**

[lizaghosh301@gmail.com](mailto:lizaghosh301@gmail.com)

### Order

| Product             | Qty   | Unit Price | Price   |
|---------------------|-------|------------|---------|
| CU Examination Fees | 1     | ₹400.00    | ₹400.00 |
|                     | Total |            | ₹400.00 |

Transaction ID: pay\_Q1zVmG01u3wrGM

02/03/2025