Category ………….. Bank's Copy	Category …....…….. Account's Copy	Category ………..…Depositor's Copy	Category ……..…..….. Deptt.'s Copy
Bank Challan Form	**Bank Challan Form**	**Bank Challan Form**	**Bank Challan Form**
Bank of Baroda, Mohaan Road, Lucknow.	Bank of Baroda, Mohaan Road, Lucknow.	Bank of Baroda, Mohaan Road, Lucknow.	Bank of Baroda, Mohaan Road, Lucknow.

Name of the A/c credited :-
Dr. Shakuntala Mishra Rehabilitation University, Lucknow
SB Account No**. 36510100000025**

Class : ……………   Date : …………

Name : …………………………..…

Father's Name : ………………………..

Fee Rs. ………………………….…..

	Fee Details	
1	Degree Fee	
2	Migration Certificate Fee	
3	Provisional Certificate Fee	
4	Duplicate Migration Certificate	
5	Duplicate Provisional Certificate	
6	Bonafide Certificate	
7	Duplicate ID Card	
8	Duplicate Library Card	
9	Other Fee	
	Total	

Amount in words: …………………..……

………………………………….……

Signature of   Checked by   Sig. of Receiver
Depositor   with bank seal

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Depositor   with bank seal