UNIVERSITY OF KASHMIR, SRINAGAR (Accredited with Grade A++) (Project/Practical/Viva Voce/Practical/Technical/Examiner's Bill Form)

Name of the Si	ıbjectName of t	he Examination	
Name of the C	entre/s		
Name of the So	cholar in respect of M.Phil/Ph.D/MD/MS		
Roll No/s of th	e Candidates		
Date	Morning Session	Evening S	Session
	osenteesTotal No		
	ation @ Per Candidate Rs	9	·
·	nargesT		
· ·	caminer (In Capital Letters)		
J	Whether Permanent / Cont		
	Mob. N		
PAN No (16) Digits Account No			
IFSC Code	Bank/Branch	details	
Revenue Stamp Worth Rs.2/- Should be affixed	Received Payment Note: No bill will be entertained without affixing revenue.	G	the Examiner
	Report of the Secrecy Se	ection	
Bill verified for	Candidates/Scholars held in	Sessions.	Work done Certificate
Dealing Asstt.	H.A. Section Officer Asstt./D	y. Controller	
Passed for Rs.	(Rupees)		
By debit to III Exa	mination: Remuneration to the paper setters and mod	derators and Credit to	
TWF	IT and Net payable Rs	•	
Rupees			
Acett. Sr. Acet	Asstt./Dy. Registrar Accounts Controller of	of Examinations	HOD/Director