

PAYING IN VOUCHER



UNIVERSITY OF JAFFNA – SRI LANKA  
THIRUNELVELY, JAFFNA

Please pay at any Branch of the People’s Bank

People’s Bank .....

Bank Manager

Please credit to Account No. **162 100 160 000 880** of the University of Jaffna, Sri Lanka, at the **University Branch** of the **Peoples’ Bank**.

Name of Payer.....

Registration No .....

Course of Study.....

Payer’s Address.....

.....

.....

Reason for Payment:

**Details of Fees Payable**

	Rs
(a) Registration Fee	750.00
(b) Course Fee	10,000.00
(c) Library Deposit Fee (Refundable)	500.00
(d) Library Fee	750.00

**Total Amount Payable 12,000.00**

**Total in words**

.....  
Date

.....  
**Depositors Signature**

Received the above mentioned amount to be credited to the Account No. **162 100 160 000 880** of the University of Jaffna, Sri Lanka, at the **University Branch** of the **Peoples’ Bank**

.....  
Signature of the Manager/Authorized Officer and Bank Seal

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