to be paid at any STATE BANK OF INDIA	<u>CHALLAN</u> BANKER'S COPY	to be paid at any STATE BANK OF INDIA	<u>CHALLAN</u> UNIVERSITY COPY	to be paid at any STATE BANK OF INDIA	<u>CHALLAN</u> APPLICANT COPY
Dr. Abdul Haq Urdu University Kurnool, Andhra Pradesh.		Dr. Abdul Haq Urdu University Kurnool, Andhra Pradesh.		Dr. Abdul Haq Urdu University Kurnool, Andhra Pradesh.	
APPLICATION CHALLAN		APPLICATION CHALLAN		APPLICATION CHALLAN	
Date:/ 2019		Date:// 2019		Date:// 2019	
Credit to the Account of The REGISTRAR, Dr. Abdul Haq Urdu University Kurnool. Andhra Pradesh.	62474614715	Credit to the Account of The REGISTRAR, Dr. Abdul Haq Urdu University Kurnool. Andhra Pradesh.	62474614715	Credit to the Account of The REGISTRAR, Dr. Abdul Haq Urdu University Kurnool. Andhra Pradesh.	62474614715
Name of the Applicant		Name of the Applicant		Name of the Applicant	
To which Department		To which Department Applied)		To which Department	
Applied Year		Year		Applied Year	
* Mobile No:		* Mobile No:		* Mobile No:	
Woone no.		Fee Particulars :	AMOUNT (Rs.)		
Fee Particulars :	AMOUNT (Rs.)	Application Fee	300/-	Fee Particulars :	AMOUNT (Rs.)
Application Fee	300/-	Bank Charges	59-00	Application Fee	300/-
Bank Charges	59-00	Total	359/-	Bank Charges	59-00
Total	359/-	(Rupees in words:		Total	359/-
(Rupees in words:		· · · · · · · · · · · · · · · · · · ·		(Rupees in words:	
(Rupees in words)				<u></u>	)
/		Signature of the Applicant			
Signature of the Applicant		To be filled by the Bank:		Signature of the Applicant	
To be filled by the Bank:		Branch code:		To be filled by the Bank:	
Branch code:				Branch code:	
		Branch Name:			
Branch Name:				Branch Name:	
Bank Seal	Signature of Authorized officer	Bank Seal	Signature of Authorized officer	Bank Seal	Signature of Authorized officer